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FOOD AND DIET IN HEALTH AND DISEASE.

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As the generation of force depends upon the consumption of material, the physiological and pathological processes of life are only possible at the expense of a constant destruction of tissue. But, as there is no absolute annihilation of matter in nature nor any absolute loss of force, matter is incessantly changing its form and force its mode of manifestation. Life is, consequently, a long series of upbuilding and downbreaking, of evolution and devolution. Tissue which is lost as such must be replaced. This re integration is accomplished by the transformation of food into tissue. We are thus, on the very threshold of our studies, led to the inference that between our food and our tissues a close chemical correspondence must exist. However different the combinations, the elements of the latter are derived from those of the former. The complicated means by which this appropriation takes place demands our closest investigation, for they are intimately related to the phenomena of health and disease.

Of the sixty-four chemical elements fifteen are present in the human body. How numerous, therefore, must be the combinations by which the distinctive physical peculiarities of skin, muscle, brain, and bone are produced, by which sweat, saliva, gastric juice, bile, and milk are elaborated!

Thus, the first glance at the physical and chemical composition of man reveals to us the presence of solids and fluids. The fluid products of cell activity consist chiefly of water, furnished by the blood but drawn from the external world. Water is a food indispensable to life. The general solvent of the natural world, it is the vehicle by which we receive many mineral compounds.

A second consideration of the nature of our food shows that it is drawn from the three kingdoms of nature,—animal, vegetable, and mineral,—and experience has convinced us that a due proportion of each of these three classes is necessary to health. We derive our mineral substances from the water which we drink, the flesh and the vegetables which we eat. Though the absorption of this variety of food is a comparatively simple chemical process, the animal body depends for its supply chiefly upon the vegetable world, which alone has the power of absorbing inorganic constituents from the soil and transforming them into organic matter. Man derives the greater part of his inorganic food either directly or indirectly from the vegetables which he consumes.

A cursory examination suggests that a chemical as well as a physical difference exists between lean meat and fat, but that the various kinds of meat, fish, eggs, milk, etc., resemble each other in their essential composition is not so obviously apparent. For information upon this point we must go to the physiological chemist. From this source we learn that organized food-stuffs are divided into two great classes,—those which contain nitrogen and those in which that element is absent. Furthermore, that non-nitrogenous substances are again subdivided into the hydrocarbons and carbohydrates. The carbohydrates contain hydrogen and oxygen in the proportion to

form water, starch and sugar being familiar examples of this variety of food. The hydrocarbons are compounds of hydrogen and oxygen, combined with but a small proportion of oxygen. To this group belong the fats and oils which constitute a necessary portion of our aliment.

In addition to these three principal varieties of organic substances, we consume organic acids present in vegetables and fruits, and pectine, which occupy a humbler position in regard to nutrition, but which probably assist in the generation of animal heat.

Albumen is a substance of extremely complex composition, and exhibits certain physical and chemical differences according to its derivation. Thus, the albumen of the egg is not identical with that of milk, of meat, or of the blood. The albumen of serum differs from that of the blood-globules, and the albumen of animal from that of vegetable bodies. Chemists have distinguished sixteen separate forms in which albumen occurs.

Animal and vegetable organisms, then, are alike made up of albumen, fat, and sugar, together with water and inorganic salts. From the foregoing brief statement we may draw the deduction, which is fortified by experience, that a mixed animal and vegetable diet is most nutritious and healthy for human beings. From a regimen thus arranged we may most surely derive the several varieties of essential alimentary principles. The hydrocarbons and carbohydrates differ among themselves just as do the albumens. The work of nutrition, therefore, is to transform these numerous varieties, drawn from widely-different sources, into those forms of albumen, sugar, and fat which are met with in the human body. Albumen under its ordinary forms, starch, and fat are insoluble in water. The problem of digestion, therefore, is to render these substances soluble in the gastric and intestinal fluids. Before animal or vegetable albumen can be converted into the albumen of the human tissues and secretions it must be changed into that condition in which it can pass into the veins and absorbents.

The work of digestion is begun in the mouth, or buccal cavity, and is continued by the action of several fluids in the stomach and small intestine. The conversion of insoluble starch into soluble sugar commences in the mouth by the action of the alkaline saliva, but is suspended in the stomach, the contents of which acquire an acid reaction. Albumen, unchanged in the mouth, is acted upon in the stomach by the acid gastric juice, and in the small intestine by the alkaline pancreatic fluid. The latter secretion completes the change of starch into sugar, continues to render albumen soluble, and by emulsifying fat renders it capable of entering the lacteals. The bile assists in the absorption of fat, and, by its antiseptic properties, preserves the contents of the tube from decomposition. Soluble albumens, now termed peptones, diffuse through the intestinal wall into the portal radicles, and, borne to the liver, are further elaborated before being received into the general circulation; for the peptones themselves are not yet identical with blood albumen, and, in fact, are even deleterious substances. It is the office of the portal blood and the liver to transform peptones into nutritive blood albumen, and to remove from the blood, in the form of urea, an excess or waste of albumen. Urea, a very soluble substance, escapes from the system by the kidneys. The soluble sugar enters the gastric and intestinal blood vessels, by which it gains the liver, in which gland it is changed back to an insoluble starch, called glycogen, and stored up in the cells of the organ to be given out in small quantities as needed, in order to fulfil its proper part in the working of the human organism. Surplus albumens are rendered innocuous by the liver. Surplus sugars are stored up by the same organ. Fat is absorbed by the lacteal vessels, and gradually assimilated as it traverses the absorbent system on its way to the general circulation. The detritus of food, that which escapes solution in the digestive fluids, forms the mass of the fæces.

Calculations have been made by various authorities concerning the minimum amount of food required for the maintenance of health and the performance of physical and intellectual labor. A consultation of such tables will convince one that most people in this country consume albuminous food greatly in excess of the needs of the organism. Conventionality and habit are, to a great extent, responsible for this evil practice, while individual tastes also have a decided influence. Doubtless here, as elsewhere, nature generously allows a wide margin, but the habitual transgression of her bounds will surely be punished. Few would be able to restrict themselves so closely as Cornaro, who lived

freely in his youth, but at the age of 40, after a severe illness, adopted a rigid diet consisting of but 12 ounces of solid food with fourteen ounces of wine. Later in life he found that he was able to support his life and strength with no more solid meat than an egg a day. On this spare diet he attained the age of 98. Nor is such severe abstinence demanded. The appetite in health generally furnishes a good, rough guide to the demands of the system. Certain habits conduce to good digestion. In the first place, meals should be taken at certain hours. The custom which many business men allow themselves to fall into of altering their lunch-hour according to their business engagements is one that rarely fails, sooner or later, to disturb digestion. A second mistake is that of rapid eating. It has often been observed that the proper performance of necessary functions is more or less pleasurable. Healthy people should enjoy good appetites. This being the case, the partaking of a meal of wholesome, palatable, and well prepared food is attended by enjoyment, and the natural tendency is to eat leisurely and prolong the pleasure. It is injurious to eat to repletion, for reasons which have already been given, and this is especially the case when physical or mental labor must be transacted after the meal. The personal equation, moreover, is often an important element in considering the dietary. For some occult reason articles of food which are wholesome and readily digested by most cannot be eaten by some persons with impunity. The list of such substances is a long one, but among those most apt to excite difficulty may be mentioned shell-fish, pork, and certain berries. Spices are obnoxious to some individuals. Pickled and smoked meats are apt to be ill borne.

It should be remembered that digestibility is not always associated with the nutritive value of a food. Some articles comparatively innutritious are readily assimilated, while others, which contain a larger proportion of alimentary principles, may be difficult of digestion. Thorough mastication is essential, dividing the food into small particles so as to facilitate the operation of the digestive fluids.

A proper preparation of food for the table is of much importance. The palatability and digestibility of most of the articles which we consume depends largely on cookery. Vegetables, which contain a preponderance of starch, should be thoroughly cooked, to the end that the starch-cells may burst their albuminous envelope and be readily accessible to the action of the saliva and pancreatic juice. The majority of meats are most nutritions when boiled or stewed. Boiled meat is best placed first in boiling water for five minutes in order that the surface may be coagulated and the juices retained. The pan is then drawn aside and the contents kept at a temperature of about 50 degrees below the boiling-point of water. If the meat is placed first in cold water, which is raised gradually to the boiling-point, the juices escape, a soup or broth results, but the meat is left hard, stringy, and insipid. In roasting, also, the object should be to quickly coagulate the surface albumen, thus allowing the inner parts to be changed slowly and gradually, preserving the palatable properties of the juices. Baked and fried meats, though tempting to the taste, are more difficult of digestion.

Different aliments differ much as regards digestibility. This variation depends partly upon their composition, partly, as we have just observed, upon the mode in which they are cooked, while, again, various conditions of age, sex, size, season of the year, mode of life, etc., affect the quality of animal food. The flesh of young animals, though tender, taxes the digestive powers more than that of older members of the same species, veal and lamb being less digestible than beef or mutton. On the other hand, the meat of aged animals is tough, unpalatable, and indigestible. Pork is unwholesome during the summer. Mutton is usually a more digestible meat than beef, though by reason of idiosyncrasy some cannot tolerate the former. Contrary to the general rule, bacon is better borne than fresh pork. Calves' liver, which is generally prepared by frying, though a very palatable dish to most people, is too rich for a delicate stomach. The flesh of chickens and turkeys is digested more readily than that of ducks and geese. The fish usually sold in our markets are savory and nutritious, though fried fish may not be acceptable to a weak stomach. Though, as a rule, they possess less nutritive value than the meat of quadrupeds, yet, when properly prepared, they are well able to support bodily vigor, and furnish an admirable addition to the dietary. The process of salting or smoking impairs their digestibility. Some of the shell-fish are highly-esteemed delicacies, but, as has been said, are peculiarly liable to excite derangement of the

stomach and reflex or toxic phenomena. Uncooked oysters are almost invariably well tolerated. Poisonous effects are, above all, produced by mussels. Soft-boiled eggs are excellent food, generally well borne and digested. Hard-boiled eggs require greater labor on the part of the stomach and exert a constipating influence. Good milk is frequently our main reliance in disease. Buttermilk is nutritious, though containing little fat, and by many is well-relished and borne.

Vegetable food contains a lower proportion of nitrogenized matter than that derived from the animal world, though a selection from the richest articles of the class is, no doubt, able to sustain life. It is, upon the whole, however, preferable that the customary diet should embrace materials taken from each kingdom. The grains and legumens, with certain tubers, are those most widely employed. Wheaten bread is an article of universal consumption: Though less palatable, perhaps, its digestion is more easily accomplished when it has become slightly stale. Toasting improves its digestibility and renders it very acceptable to invalids or convalescents. Oatmeal is a wholesome and valuable food for healthy people. It has some laxative effect, which is of advantage to those who suffer from constipation. In children it is apt to cause diarrhœa, and from the abundance of carbohydrates which it contains may even give rise to dyspepsia in adults. An eruption upon the skin is sometimes due to the ingestion of oatmeal. Indian corn contains a larger portion of fatty matter than other grains. Rice is distinguished by its large amount of starch. Peas and beans are characterized by the comparatively large amount of albumen which enters into their composition. Their food value is, consequently, high, but they are very apt to produce flatulence and colic. Potatoes abound especially in starch, and are, therefore, unfitted to act as the chief constituent of a meal. The best manner of cooking them is by boiling or roasting them in their skins. This converts them into a soft, mealy mass, which is readily digested, whereas, when their substance is close and watery, their digestion is much less easily accomplished. The sweet potato, roasted or boiled, is palatable and wholesome, but very hard to digest. Carrots and turnips are extensively used in the preparation of soups and stews, and are acceptable to those endowed with good digestive powers. The former, however, often occasions flatulence, while the latter possesses comparatively little nutritive value. Plants of the cabbage tribe contain a large proportion of water, and are, therefore, comparatively innutritious. They are apt to derange the stomach and bowels, but have the advantage of possessing antiscorbutic virtues. Spinach is agreeable, wholesome, and slightly laxative. Rhubarb should be avoided by those in whom a tendency to the deposition of the oxalate of calcium is present. On account of the large proportion of sulphur which it contains, the onion is a valuable article of diet, though rather difficult of digestion. Celery, asparagus, and lettuce are savory and wholesome vegetables. Stewed tomatoes are appetizing and are valued on account of their piquant flavor, though not very nutritious. Fruits, while not contributing much directly to nutrition, are beneficial on account of the acids they contain, and prevent the occurrence of scorbutic manifestation in those who are compelled to live largely upon dried and salted meat.

The sugars are essential articles of food, valuable in the generation of force and concerned in the production of fat. Various farinaceous materials, such as sago, tapioca, and arrowroot, from their easy transposition into sugar, are useful members of our dietary. Tea and coffee, taken in moderation, are beneficial, and conserve bodily force. Strong, green tea, however, embarrasses digestion and occasions constipation. The excessive use of coffee, likewise, has an unfavorable influence upon digestion and may produce unpleasant nervous symptoms. Chocolate possesses decided food-value, since it contains about 20 per cent. of albumen, about 50 per cent. of fat, and 10 per cent. of starch, together with a distinctive alkaloid, theobromine, which is related to caffeine and theine. The large proportion of fat in chocolate will often render it unsuitable to weak stomachs.

I shall not enter into the question of the worth of alcoholic beverages, as the subject is too extensive for the scope of this paper. Suffice it to say in this connection that, according to my belief, while alcohol has its place in the treatment of depressed nutritive states, individuals in the enjoyment of ordinary health have no urgent need for the use of malt or spirituous liquors. After the labor of the day is done, however, the temperate enjoyment

at the dinner-table of a good ale, light wine, or a little spirits and water may promote digestion and result in no harm.

I have already said something as regards the importance of regular meal-hours. For various reasons this rule is far too often transgressed. A slothful or luxurious morning nap too often betrays one into the habit of late rising and its consequence, a hurried, scanty breakfast, is succeeded by a run for the most convenient street-car. At mid-day lunch may be postponed to the exigencies of business, and the same reason may detain one at his place of business after the hour for closing has arrived. If to these blameworthy habits is added the haste, bustle, and nervous tension under which much of the business of this country is transacted, we have found, without proceeding further, conditions directly provocative of digestive failure. A rush down town in the morning, a rush of business all day long, with, perhaps, some alcohol and too much tobacco, a rush home in the evening with an overwrought nervous system, is a manner of life common to many eager business-men in American communities. Such habits almost inevitably impair the appetite and develop nervous dyspepsia, insomnia, and other ills. Ultimately, the victim rushes into an untimely grave. An orderly arrangement of time can generally secure a regular meal-hour. Breakfast leisurely eaten, a walk to the place of business, if not too far, a light lunch at 1 P.M., and a dinner about 6.30 P.M., partaken slowly, accompanied by light, cheerful talk, would seem to be a more agreeable, as it is certainly a more healthful, arrangement of the day.

The principal meal of the day is advantageously postponed until the day's work has been performed. An elaborate dinner during business hours is a needless sacrifice of time. A hearty meal should not be followed by close application, either to physical or intellectual work. Nervous force should be allowed to preside undisturbed over the digestive function, which cannot be the case if the body or the mind is busily engaged in work. Furthermore, the late dinner can be followed by social recreation, either at home or abroad, by a satisfactory digestion which has been mainly accomplished at the arrival of bed-time, and which predisposes to a good night's rest.

In thus glancing at the physiology of digestion, the nature and value of the foods usually found upon our tables, and the manner in which we should approach the table, we open the way for a clear comprehension of the relation of diet to nutrition and malnutrition, of the way in which disease may be engendered by bad dietetic habits, or relieved by an appropriate regimen. Scarcely a subject can be found of more interest to the physician and importance to those whom he advises. For in an enormous proportion of cases ill health can be traced to infringements of the natural laws governing the consumption of food. On the other hand, a skillful management of the invalid's dietary, though a difficult task, is often followed by the most gratifying results.

From our preceding study we may learn that a moderate-sized meal, leisurely enjoyed and thoroughly digested,—a meal in which the nutritive principles of the food are incorporated by the tissues,—is of far more actual worth than an abundant meal badly digested. In the latter case discomfort certainly follows, and the system probably fails to appropriate enough to supply its need. If a vigorous appetite stimulates one to consume an amount of food far in excess of the demands of the system, the immediate result is torpidity, soon followed by increased blood-pressure and abnormal activity of the eliminative organs. The practice of habitually eating and drinking to excess imposes a constant strain upon the organs of digestion, circulation, and elimination. This strain eventuates in the production of functional disorders, which, in the course of time, become organic, in the elaboration and retention of toxic products and the genesis of various toxic states.

Improper habits, as regards diet, is the most prolific cause of dyspepsia. Eating hastily, with a pre-occupied mind, masticating imperfectly, eating at irregular intervals, the consumption of excessive quantities, midnight lunches, will, in most cases, sooner or later entail mischief. Nature usually gives the transgressor ample warning of the danger of the course he pursues. Attacks of acute indigestion, accompanied by vomiting, colic, and diarrhœa, call attention to an oppressed alimentary tract. If such warnings are neglected, chronic dyspepsia is gradually established. Appetite becomes capricious, and is no longer a safe guide as to the kind and quantity of food to be consumed. The patient becomes timor-

ous in his eating, is afraid of one article or another, attempts a rigid regulation of his diet, and, by a constant direction of thought to his digestive apparatns, in all probability aggravates his trouble. Flatulence ensues, with palpitation of the heart, nervous alarms, constipation, while fermentive decomposition of the contents of the stomach occasion heart-burn and water-brash. Gradually the presence of ill-elaborated products excites a gastric catarrh, the gastric juice becomes altered in composition, the walls of the stomach become coated with a thick mucus, which mixes with the food and offers an obstacle to the penetration and action of the gastric juice. The difficulty progresses from stomach to bowel, the intestinal fluids are modified, the tube becomes catarrhal, and this process may spread to the common bile duct and result in attacks of jaundice and the formation of biliary concretions. Fermentative decomposition is continued, and involves albuminous, fatty, and starchy materials. The blood is contaminated in a two-fold manner, being robbed, on the one hand, of its proper and sufficient pabulum, while, on the other, various deleterious, or even noxious products are thrown into the circulation. Anæmia and toxæmia result from embarrassed digestion, while insufficient nutrition is a factor co-operating in the production of chlorosis. An impoverished blood imperfectly nourishes the various tissues and organs, so that we daily meet with pale faces, flabby muscles, weak action of the heart, functional murmurs, headaches, neuralgia, and other evil consequences of chronic indigestion. The sexual powers decline, and, in women, menstrual difficulties are induced. Diseases of the skin, often of a very obstinate character, such as seborrhœa, acne, rosacea, lichen planus, and furunculus are, in many instances, connected with digestive failures.

An even more formidable array of diseases is due to impairment of the functions of the liver. A part of the work of this important organ consists in the removal of the excrementitious products from the blood. It decomposes noxious products, and recombines them in such form that they are rapidly eliminated by the kidneys and bowels. In persons of vigorous appetite and naturally strong digestive powers, who habitually indulge to excess in the pleasures of the table, the liver is constantly overworked. The difficulty is intensified if, as is frequently the case, these individuals lead sedentary lives. Instead of being carried on to the formation of urea, the metamorphosis of waste-products is stopped at the production of uric acid, an insoluble substance not easily eliminated. Brick-dust sediments appear in the urine, and various difficulties arise, due to the retention of uric acid in the circulation. This condition, now generally known as lithæmia, makes its presence known by attacks of asthma, palpitation of the heart, angina pectoris, various affections of the skin, and terminates, if not checked, in a paroxysm of rheumatism and gout. Arterial pressure is heightened, the heart hypertrophies, and the kidney contracts. Finally, we have increased production of excrementitious materials, with diminished capacity for elimination; toxic substances accumulate, until they are present in sufficient quantity to overwhelm the nervous system.

Much the same vicious progress is inaugurated in those born with incapable livers, though the incessant watchfulness which this defect compels may preserve the sufferers from the graver consequences of lithæmia. Cardiac depression and melancholia are among the effects of hepatic disorder.

An improper diet, especially one in which vegetables are deficient, is the main cause of scurvy. An insufficient diet has much to do with the production of rachitis.

Uric acid is an irritant to the genito-urinary tract. From its insolubility it tends to deposit in the kidney or bladder. The presence of calculi excites pyelitis, pyelo-nephritis, or cystitis.

Although vegetable aliment would seem to be sufficient to meet the demands of the system, judging from analyses of the composition of the chief vegetable products, yet it has been found to occasion premature atheromatous degenerations. It contains a larger proportion of mineral matter than does animal food. These salts accumulate in the blood, and are deposited in the arterial walls.

In the treatment of disease much good can be accomplished by a properly arranged diet. If the disorder has been originated or is perpetuated by faulty digestion of a certain class of aliments, articles belonging to that class should be given in diminished quantity, or altogether prohibited; at least, for a time. It will also be found beneficial to indicate to the

patient such foods as will afford him the maximum of nourishment with the minimum of discomfort. Each individual case should be studied, not only in reference to the general principles of dietetics and the physiology of digestion, but the personal peculiarities of the patient, his tastes, temperament, former habits, etc., must also receive attentive consideration.

In dealing with dyspepsia we should endeavor by every possible means to discover the organ principally or primarily at fault. If the stomach be chiefly concerned the patient will experience most difficulty in the digestion of albumens. Fat and starch may, in such a case, give rise to little or no trouble, being in the small intestine placed in a proper condition for absorption. Under these circumstances it is a good plan to limit for a time the ingestion of albuminous food, and depend principally upon the carbohydrates with a moderate supply of fat. Restriction should not be excessively rigid or too long prolonged. Nitrogenous aliment is absolutely demanded, and the power of the stomach is further weakened if it habitually has too little work to perform. A temporary or comparative rest, however, will generally be found of service. The patient should be directed to partake rather sparingly of animal food, and should be instructed as to those articles which are most nutritious, and which, at the same time, demand the least activity on the part of the stomach. Meats should be simply cooked, boiling or broiling being the most appropriate mode of preparation. Mutton is generally more acceptable than beef. Poultry and game may be allowed, and white fish, either boiled or broiled. Bread should be dry or toasted; peas and beans should be forbidden. Potatoes, rice, and dishes prepared from corn-starch, sago, or tapioca are suitable vegetable food. A little wine or whisky taken with the meals is likely to assist digestion by a stimulating effect upon the stomach. Fruits, eaten moderately, are beneficial. Albuminous food must be taken in limited quantity when hepatic disorder prevents the secondary elaboration, which has been already described. This form of difficulty is accompanied by the deposit of uric acid in the urine and often by headache, low spirits, or hypochondria, and muscular and joint pains. In this condition alcoholic drinks are usually harmful. Mealy potatoes, turnips, carrots, beets, onions, starchy food and fruit are nutritious and relieve the disabled liver. Milk puddings will furnish a moderate supply of albumen, while white fish, poultry, and oysters may be used in order to vary the monotony of the diet.

In chronic and severe cases of indigestion it is well to administer predigested food.

The dietetic management of the gouty diathesis must be conducted upon the principles outlined as proper in derangement of the liver, resulting in lithiasis. Starchy food, even if not readily digested by these subjects, is productive of less serious and far reaching evil than unrestricted indulgence in nitrogenized aliment.

Anæmia and chlorosis require a regimen containing as large a proportion of albuminous material as can be utilized. It is necessary to be cautious in beginning the treatment of well-marked cases, since the stomach is apt to be intolerant. Oysters, sweet-bread plainly cooked, underdone beef, with bread, potatoes well boiled, mashed, and covered with meat-gravy, and a little ale or wine, are generally well borne and are decidedly beneficial. It may be necessary to pave the way with some concentrated food. The drawback to the use of many of these preparations is, that, though theoretically all that is desirable in presenting the nutriment in a condensed form, yet their appearance and unpalatability excites disgust and nausea. I have found sarco-peptone and the Mosquera-Julia beef-powder least open to these objections. Kumyss, likewise, serves a useful purpose in these cases, being both nutrient and mildly stimulant.

Fat should enter as largely as possible into the diet of neuralgic patients, which should, in other respects, be of a supporting and digestible character. Fat beef or mutton, vegetables containing a large proportion of oil, the oleaginous seeds, olives, and chocolate diminish the susceptibility to attacks. A similar dietary is useful in chorea and hysteria.

In diabetes mellitus the regimen is of such prime importance, and is so carefully described in the various text-books, that there exists less necessity, in a brief paper, to dwell at any length upon the subject. Starch and sugar must be denied the patient. These elements, so useful in health, become deleterious in this disease. One excellent method of treating diabetes is by the exclusive use of skimmed milk. But, as this plan is not always practicable, various dietaries, agreeing in the main, have been

constructed upon the principle just indicated. Meat (with the exception of liver), poultry, game, fish and shell-fish, unthickened soups, eggs, cheese, butter, and vegetables containing little starch or sugar, such as cabbage, cauliflower, beans, turnips, asparagus, and young onions may be permitted, and nuts (excepting chestnuts). Malt liquors and sweet wines are forbidden. Potatoes, parsnips, beets, rice, carrots, farinaceous foods, wheaten bread and biscuits must be avoided. As substitutes for wheaten flour, almond, bran and gluten are employed. In Bright's disease, where the blood is already charged with toxic materials, digestion and elimination being alike weakened, we must scrupulously dread the imposition of additional labor upon each function. Albumen is best supplied to the system in the form of milk. When, for any reason, milk is, or becomes, repugnant, we must choose those foods which are at the same time nutritious and easily digested.

Judicious alimentation at an early stage of the process may prevent the formation of biliary, renal, or vesical calculi. When these concretions have formed, their removal is beyond the power of any dietary scheme, unless we believe that olive-oil is able to cause extrusion of gall-stones. These foreign bodies occasion, however, much digestive disturbance, and compel adherence to a simple diet.

Scurvy is cured by the consumption of fresh vegetables and fruit. Rachitis requires a liberal allowance of mineral combinations, which are present most abundantly in vegetable food. Scrofula and tuberculosis are benefited by as generous a supply of fats as the system can assimilate. In acute infectious diseases the loss of appetite and vitiation of secretions forbid all but the simplest alimentation, that by means of milk being most widely applicable.

Having pointed out the principles which should guide us in the arrangement of diet as a therapeutic measure, and described the nutritive and digestive properties of the articles in most common use in this country, it is, I conceive, needless, and would be tiresome, to repeat a list of articles beneficial or injurious in each malady, the production or amelioration of which is intimately associated with the consumption of food. I think that in many obstinate cases it will be of advantage for the attendant to arrange diet-lists according to the principles laid down in this paper. These lists can be given to the patients. It is not well, however, for a dyspeptic to think too constantly of his digestive apparatus. On the other hand, the sufferer will often tire of a too monotonous diet, and well-considered lists afford us the means of suggesting a variety of dishes. I think that it would be eminently advantageous if every student of medicine were obliged to spend some months in obtaining a practical knowledge of cookery. That useful branch of knowledge might be cultivated in connection with the study of organic chemistry. Considerable skill in the art is often acquired in the course of sporting excursions. The medical student might use his vacation to a very practical purpose in gaining health by camping in the woods, and, by taking his turn as cook, gaining knowledge which will be beneficial to his future patients and serviceable, as well as profitable, to himself. I am confident that a sedulous attention to dietetics is an important element of a physician's success in the treatment of chronic cases.

In conclusion, I append a brief summary of the contents of this paper, together with a list of wholesome foods, arranged in the form of a bill of-fare or diet-list for breakfast, lunch, and dinner for persons in average good health :—

Food, to be well digested and assimilated, should be selected from those articles which may be suitable to each person. The quality of the food so selected must be good, well prepared or cooked, for often much depends upon its proper preparation. Too much seasoning of food, likewise, frequently lessens both digestion and assimilation. Further, in weak and impaired action of the digestive organs, sugar, honey, syrup, starch, or starchy substances and fat, should be avoided as much as possible, both in the preparation of food and in the dressings that may be used.

Fish, fowl, pork, veal, chocolate, strong coffee, tea, and too much water, wine, liquors, and a large quantity of any drinks is usually interdicted.

Care should also be exercised, in partaking of food, to eat at regular intervals, eat slowly, masticate the food well, and, above all, not to take too much during the meal. A small quantity of food often builds up the body quicker and better than overdistending the stomach with a large amount, which often leads to poor digestion, bad assimilation, and many diseases. Food may be selected from the following list arranged for the three daily meals :—

BREAKFAST.

Fruits: Oranges, grapes, melons, apples (raw or baked), peaches, pears, plums, cherries, apricots, berries, persimmons, mulberries.

Oysters: Raw, broiled, stewed, scalloped, roasted; little neck clams.

Eggs: Soft or hard boiled, poached, omelette, scrambled.

Meats (broiled or stewed, served hot or cold): Beefsteak, beef (chopped or grated), mutton, lamb chops, kidneys, tripe, venison, duck, squab, partridge, quail, snipe, rabbit, squirrel, chicken.

Potatoes: Boiled, baked, stewed.

Cereals* (boiled): Cracked wheat, farina, corn-meal, barley, hominy grits, oat-meal.

Breads: Browned flour, wheaten bread (plain, toasted, or with hot water or milk), stale bread, zwieback, rolls, muffins, corn bread, brown or Graham bread, rye and bran bread (with or without butter).

Cheese: Cottage cheese (with cheese, milk or cream).

Drinks: Hot water, barley or rice water, milk† (hot or cold), buttermilk, cocoa, coffee, tea, chocolate.

Fats: Butter (salted or unsalted), meat-gravy.

LUNCH.

LUNCH, TEA, OR SUPPER.

Oysters: Raw, steamed, broiled, roasted, or scalloped; little neck clams.

Soups: Consommé or beef, chicken, mutton broth.

Meats (broiled, stewed, or roasted; served hot or cold): Beefsteak, mutton, lamb, turkey, chicken, venison, kidneys, rabbit, corned beef, tongue, tripe.

Eggs: Soft or hard boiled, poached, scrambled, omelette.

Cereals* (boiled): cracked wheat, hominy grits, farina, corn-meal, barley, oat-meal.

Fruits: Oranges, grapes, grape-fruit, pears, peaches, melons, plums, persimmons, berries; apples or pears (raw, stewed, or baked); stewed peaches, cherries, plums or prunes, apricots.

Vegetables: Stewed rhubarb, potatoes (boiled, baked, or stewed), tomatoes (raw, baked, or stewed).

Breads: Browned flour, wheaten bread (plain, toasted, with hot water or milk), stale bread, zwieback, rolls, muffins, corn bread, brown or Graham, rye or bran bread, Graham biscuit, cream biscuit, soda biscuit.

Drinks: Sweet skimmed milk, buttermilk, kumyss, hot water, rice or barley water, coffee, tea, cocoa, chocolate.

For table waters, malt liquors, wines, and spirits, see Dinner List.

DINNER.

Oysters: Raw, steamed, broiled, stewed, roasted, and scalloped; little neck clams.

Soups: Consommé or beef, tomato, mock turtle, ox-tail, chicken, mutton broth, pea, potato, bean, calf's head, oyster, clam, giblet, gumbo, barley, rice, sago.

Fish: Boiled salmon, trout, haddock, bass, blue fish, mackerel, planked or baked shad, rock, stewed terrapin, stewed frogs, perch, sheepshead, boiled lobster, eels.

Meats (broiled or roasted): Spring lamb, mutton, beef, corned beef, venison, baked or broiled sweet breads, boiled or stewed tripe, turkey, chicken, snipe, quail, squab, grouse, partridge, stewed rabbit.

Entree: Macaroni (with milk or tomatoes), lamb chops (breaded), tomato sauce.

Vegetables: Potatoes (boiled, baked, or mashed), Lima beans, cauliflower, spinach, pumpkin, rhubarb, oyster-plant, carrots, egg-plants, turnips, cabbage, tomatoes (raw, stewed, or baked), sweet potatoes, string beans, green peas, asparagus, corn, yams, beets, succotash, boiled rice, onions, brussels-sprouts, parsnips, squash, radishes.

Salads: Celery, water-cress, lettuce.

Pastry: Brown Betty, rice, bread, gelatin, farina, tapioca, or sago puddings (with or without milk or cream); cup custard, apple sauce (with whites of eggs and milk); sponge cake, wine or rum jelly, omelettes, charlotte-russe.

Ice Cream and Water Ices: Vanilla, coffee, orange, peach, apricot, pine-apple, lemon, cherry, currant, raspberry.

Fruits: Oranges, grapes, peaches, apples, grape-fruit, plums, pomegranates, berries, cherries, pears, persimmons, mulberries, apricots.

Drinks: Sweet skimmed milk, buttermilk, lemonade, raspberryade, ginger ale.

Table Waters: Plain soda, Apollinaris, Vichy, Seltzer, lithia water, Wilhelmsquelle.

Malt Liquors: Ale (especially Allsop's and Bass's), beer, stout (either Guinness's or Allsop's).

Wines and Spirits: Claret (St. Julien, Medoc, Black Rose), the red wines of Egg Harbor (New Jersey) and California; Sauterne, Burgundy, Beaune, Pommard, Chaelis, Romanee, Hock, Rhine, and Hungarian wines; Liebfraumilch, Niersteiner, Hockheimer, Johanisberger, etc.

Whiskies: Rye, Scotch, and Irish.

1519 WALNUT STREET, PHILADELPHIA.

* Hot water or milk with a *little* salt or sugar can be used with the cereals.

† From a teaspoon to a tablespoonful of lime-water may be added to each glassful of milk to overcome any acidity or unpleasant effect that sometimes follows its use.

ON THE POISONOUS ACTION OF HOPS.

By JOHN W. ECKFELDT, M.D.,

Lecturer on Therapeutics in the Medico-Chirurgical College of Philadelphia.

A FEW years ago my attention was called to a peculiar form of poison caused by contact with the strobiles of the common hop, *Humulus lupulus*. So very remarkable was the case that I was led to make some further investigations in relation to the peculiar and little known source of this form of dermatitis, and, as I had never heard of any eruptive disease or any other injury to the skin caused by this common plant, I have regarded it equally as interesting and novel to bring it before the notice of the dermatologists.

The hop-plant, which belongs to the natural order of Urticaceæ, is an extensive family in the tropical regions, and includes the nettle tribe, characterized by having apetalous and diœcious flowers.

Of all the plants which belong to this order peculiar to the North American continent, there are none with which I am familiar that are capable of inducing any decidedly unfavorable influences when brought in contact with the skin, by means to which I will presently allude. The nettles alone are endowed with very numerous, stinging hairs, which are associated with minute, superficial glands containing an acrid fluid (formic acid), and these, when brushed over the surface, will excite a painful eruption, attended with considerable itching and burning that soon subsides as the physiological effects wear off or are allayed by local applications of some of

the alkaline washes. The remaining genera of this order are innocuous to the most delicate and sensitive or easily susceptible constitutions.

The hop to which I have alluded may be handled with entire impunity by the general class of individuals, yet the plant itself is empowered to inflict some injury, provided it possesses any irritating substance, in connection with the pilose nature of its cuticle, of the stem and leaves; but, so far as my experience goes, I have failed to detect any property of the plant, while growing, capable of doing harm. The upas, or *Antiaris toxicaria* of Java, has been long known as the deadly tree to many of the popular writers, which is, unfortunately, not a grave mistake, as credited by some. The tree, a large one, belonging to the same order as the hop, contains certain elements, consisting in a peculiar principle, having all the activity of a very powerful poison. This principle is antiarin. This plant, when simply approached, regardless of handling, but aggravated by disturbing the foliage or exposure to night influences, is capable of emitting an aëriform matter which very unpleasantly affects many of those who approach it, causing a formidable eruption upon the skin and more marked tumefaction of the deeper layers of the surface, while others seem perfectly free from its influences.

Internally used, this plant is a poison.

In relation, now, with this plant, I here intend to show that the hop has such action in some individuals, as I will endeavor to demonstrate. Having had the occasion of directing the use of hops in the form of a fomentation, I advised that a large flannel bag be filled and then immersed in boiling water, allowing the excess of water to drain off previous to use; in the course of the procedure, a lady manipulating the operation was compelled to have her face and neck exposed to the abundant vapour, which at the time caused no inconvenience. After the lapse of six hours a general burning of the skin ensued, accompanied by stiffness of the muscles, ending in a general smarting and tumefaction of the tissue, adding to the features very great disfigurement, and obliterating the eyes.

The general appearance of the cutaneous surface was highly reddened and covered with minute, shining papules, which, in the space of another day somewhat coalesced and developed into a pustular stage, the pustules containing at first a clear fluid; subsequently, a denser matter, drying and forming crustations.

The pain and burning attending the course of the disease seemed to me quite unparalleled, as the means called into action had but little effect in subduing the general distress of the individual. This type of dermatitis, characteristically a specific form of the disease, continued for upward of six weeks, leaving the skin erythematous and very sensitive. Since then I have had occasion to witness other cases caused by the same means. All the symptoms in each case were identical with the first.

Suspecting, very naturally, that some other plant had become mixed with the strobiles, as, for instance, the leaves of the Rhus, I carefully investigated the supply, and found that the specimens were absolutely unadulterated. The hops themselves were grown in a city garden, where no such plant as the Rhus abounded. As I have never seen any allusion to this singular physiological action of hops, I have endeavored to see wherein the deleterious substance resided.

As hops contain resinous principles and a very diffusible volatile oil, it is evident that, from such conclusions, the virulent properties of the drug resided in the oil, which, when vaporized by the boiling water, condenses on the skin exposed to its influences, thereby absorbing the oil in its minutest proportions, congesting the capillaries, and hence causing the general inflammatory action of the skin.

I have attempted further to convince myself relative to the irritating principle of the hops, by endeavoring to extract by chemical analysis other products capable of producing irritation when applied to the skin; but, as I have failed in isolating anything different from what has already been discovered, I again must refer to my former view. Ethereal and chloroformic extracts failed to contain anything but the resin. The same may be said of the extractives derived by the bisulphide of carbon and alcohol.

Essentially these extracts are sure to contain all the active substances, and, having all the characteristic odor and taste of the strobiles, yet no action was apparent when they were rubbed freely into the cutaneous surfaces of a delicate and sensitive individual, but, on the

contrary a slight sensation of tingling, followed by some numbness. The treatment most acceptable was of the blandest nature; weak alkaline solutions afforded some general comfort in the earlier stages, especially the sulphite and hyposulphite of soda in bran-water. The ointments containing oxide of zinc, bismuth, and maranta fecula, with cocaine or morphia, seemed to allay the distress as quickly as anything.

The different vegetable extracts, so popularly used for other poisoning, proved useless in this disease. Strict attention to the diet, forbidding the use of any stimulating article, and the daily administration of saline laxatives lessened the severity of the disease.

The recurrence of the eruption was again caused in the same individual two years afterward by using the same means. I cannot ascribe any idiosyncrasy to these cases.

NOTES ON THE THERAPEUTIC PROPERTIES OF VALERIANIC ETHER.

By J. D. CHRISTMAN, M.D.,
ALLENTOWN, PA.

VALERIANIC ETHER, discovered by Otto, was first applied as a therapeutic agent by the distinguished chemist, Vial.

The pure valerianic ether, prepared by M. Vial, is less volatile than ordinary ether, and has the appearance of a heavy, colorless oil. Its density is 0.894 at 13° C., the odor is penetrating, and the taste recalls somewhat that of the melon.

In this concentrated form, however, it is unfit for internal use, and on this account its strength is attenuated by the addition of ordinary ether, which gives a better preparation of medicinal valerianic ether (Vial), perfectly safe and reliable for internal administration.

As a prompt antispasmodic this preparation is best dispensed in the form of a small, round capsule, containing 15 centigrammes (about 4 drops), easy to swallow and well adapted for preserving its full activity.

The valerianic ether contained in these capsules is less volatile than ordinary ether, its effects are more energetic and permanent, while it is certain in its action and more convenient to administer than valerian.

Dr. Walling (Times and Register, 1890) recommends its use in painful dysmenorrhœa in place of hypodermatic injection of morphine, and finds that it is the only remedy with young girls which really gives prompt relief; and Dr. E. Frost Newton, in her valuable brochure on "Menorrspasm," holds the same views in hysterical complications, which the valerianic ether-pearls mitigate or prevent coming on.

Drs. W. H. Marsh and Phillips find it very useful in nervous headache and excitement. Before and during the functional excitement of menstruation, characterized by weak pulse, giddiness, vapors, spasms, muscular trembling, and nervous irritability, it renders considerable service.

"It may be safely recommended to ladies susceptible to such accidents, and in those general cases of nervous excitability characterized by neuralgia, nervous headache or megrim, cramps of the stomach, digestive troubles, nervous retching, and vomiting."

The action of valerianic ether is almost specific in its action in cases of asthma. This combination of valerianic acid and ether possesses virtues which neither alone possesses. Bosworth has tabulated 80 cases of asthma, of which 72 were produced by nasal defects; and where reflex neurosis existed this remedy was of great service, because the action of valerian is direct upon the nerves. It renders them tranquil and the effect lasts for about two or three hours.

Ether, *per se*, acts very decidedly in asthmatic cases. I recall distinctly to my mind a case, Mrs. Y., aged 42, American by birth, who has had asthma for twelve years. She had been treated by various physicians, and without any perceptible relief.

Her case always became aggravated when nearing her menstrual periods. I prescribed the pearls of valerianic ether (Vial), a sample of which had been sent to me by the importer, Mr. F. S. Mason, of New York. The dose administered was two pearls after each meal and upon retiring, with an extra dose of one or two pearls during the attack. This was continued for about two months, when I discontinued the remedy. I saw her a short time ago, after a lapse of over four months. She has enjoyed complete immunity from the malady during this period.

The writer himself is subject to a periodic

attack of hay fever, with aggravated asthma during said attack. After having used various remedies with no apparent relief, he consulted Dr. J. Solis-Cohen, and a course of the valerianic pearls was agreed upon; the result has been eminently satisfactory; the dose was about the same as in the case just stated. I have repeatedly prescribed this remedy in various neurotic affections, and find that the action is always prompt, that the drug is pleasant to administer, and has no bad effects.

LIGATION OF FEMORAL ARTERY AND VEIN IN LOWER PART OF SCARPA'S TRIANGLE, AFTER FAILURE OF DIGITAL PRESSURE, FOR THE CURE OF POPLITEAL ANEURISM.

By D. BENJAMIN, M.D.,
Surgeon to Cooper Hospital, Camden, N. J.

MR. ABT, aged 28, came to my office on the 28th day of August, 1891, complaining of a throbbing tumor behind the right knee, about the size of a man's fist. He stated that this had been examined by several physicians, and that he had been referred to hospitals for treatment; had been told that his condition was unfavorable for operation.

I told him that I would admit him to the Cooper Hospital, where I was in charge of the surgical ward, and would make an attempt to cure him. He therefore applied, and was admitted on the 1st day of September, 1891.

On careful examination it was found that the entire heart was hypertrophied, especially the left ventricle; that there was mitral regurgitation, and also aortic insufficiency, a double murmur being present. He had stopped for several years the use of alcohol, which he had previously used freely.

His friends to the number of a dozen, laboring men, were secured, and digital pressure was made in the usual manner. In two days the limb had become swollen, œdematous, and painful. The force of help had fallen off, one or two at a time, and been reduced to three or four, and they were about exhausted. We therefore utilized the pupils of the Nursing School, and soon found that their pressure was far more efficient in controlling the circulation through the artery, their sense of touch being more delicate and intelligent, and productive of less irritation; in fact, the œdema began to subside, while the tumor showed more signs of coagulation.

However, in five days our resources were exhausted, and digital pressure was intermitted every thirty-six to forty-eight hours for a period of eight to ten hours. Local inflammation had been set up in Scarpa's triangle, deep-seated, and involving the vessels and their sheaths.

Pressure was therefore discontinued until the man's condition improved, and on the 25th day of September, 1891, we proceeded to operate, the condition of his heart being such as to preclude the use of an anæsthetic. He was directed to lie as still as possible. An incision was made about three inches long, extending upward from Hunter's canal. On reaching the vessels the muscular branch coming off from the artery at the point at which the sheath was opened was divided. This necessitated dissection half an inch farther up the artery in order to ligate above this vessel. It was found that the sheaths of the vessel had become so inflamed, adherent, and fused that the vein could not be separated from the artery without great difficulty; in fact, the walls of the inflamed veins were torn in the attempt, necessitating ligation of the vein below the point at which the artery was ligated.

The artery and vein having been well ligated with chromicized catgut ligatures, and all hæmorrhage having absolutely ceased, the wound was washed out with an antiseptic solution of 1 to 2000, closed with catgut sutures, and treated antiseptically. The shock from the operation was scarcely perceptible. Circulation in the aneurismal tumor was entirely cut off. The temperature of the patient reached on the following day its highest point, $100\frac{4}{5}^{\circ}$, and the pulse was 100. Very little œdema occurred in the limb, which was wrapped in raw cotton, and, after the second dressing, which took place on the 3d day of October, 1891, slight suppuration had occurred. This seemed to come from the small space exterior to the ligatures, was small in amount, and all of the wound, with the exception of about one inch in this locality, united by first intention.

The small space where suppuration occurred granulated and healed up from the bottom. No untoward symptom occurred in the case, and the patient, so far as the aneurism is concerned, has made a complete recovery.

The points of interest in this case, to which attention is called, are:—

1st. The severe heart disease and hypertrophy producing a stronger than normal impulse and strain upon the walls of the arteries already diseased.

2d. The successful ligation of both vein and artery at the same time.

3d. Operation without the use of an anæsthetic.

4th. The disadvantage which the inflammation caused by previous attempts at digital pressure occasioned.

5th The advantage of long-continued digital pressure before ligation in establishing good collateral circulation, by gradually enlarging the collateral vessels.

209 Cooper Street.

ADDRESS.

*THE AMERICAN PHYSICIAN IN LITERATURE.**

By E. L. B. GODFREY, A.M., M.D.

MR. PRESIDENT AND GENTLEMEN OF THIS SOCIETY: The latter part of the eighteenth century witnessed the dawn of American literature. It first arose in the form of theological discussions, due to the enjoyment of religious liberty and the superior attainments of the clergy. The desire, however, for political freedom, gave birth to the great oratorical speeches of our forefathers, which occupied the front rank in the literature of the early part of this century. Contemporaneous with these were the beginnings of American poetry, fiction, and journalism; and, since then, such rapid progress has been made in all forms of literature, that to-day America stands adorned with gems of thought whose brightness is undimmed in the presence of the richest treasures of the ages.

HISTORY.

No department of literature has been cultivated in this country with greater credit to authors than history. Untrammeled by political authority, the American historian has been free to connect the events of the past with those of the present, and to impart to them his own convictions. Nor is this all. The diversity in sentiment of the different nationalities meeting on a common ground; the necessity of urgent action in tilling the soil and providing for physical comforts; the dangers and adventures incident to border life; the liberty of speech and religion; the freedom of the press and the political opposition to the mother country,—all tended to beget a people unsurpassed in their independence of thought and action and self-reliant powers. The very actors in American history have given inspiration to historic pens; and, in recounting their deeds, a narrative has been produced that reflects the greatest liberty and progress known to mankind.

If the works of our early historians seem crude, and tinctured with an ancestral philosophy that we of this day will not acknowledge, the splendid scholarship of George Bancroft, Jared Sparks, and Benson J. Lossing has not only placed the rich historic data of the past upon an enduring literary basis, but has pictured for posterity acts of heroism and patriotism unparalleled in the history of the world. To this rich display of historic learning, which Gibbon, Hume, and Macaulay would have honored, the medical profession has contributed no small part. In the early period of the Revolution, there sprang from the loins of the medical profession a man whose work is still stamped with the seal of literary and historic approval. Dr. David Ramsey bears the honored title of "The Historian of the Revolution." He was born in Lancaster, Pa., in 1749, and, after graduating from Princeton and in medicine, he entered upon the practice of his profession at Charleston, S. C. Of great professional and literary industry, an ardent patriot and a fluent orator, he early espoused the cause of his country; and such was his influence and force of character, that he successfully opposed, amidst great opposition, the confiscation of the property of his neighboring loyalists. He entered the Continental army as surgeon, and, in 1780, was captured and held, with others, as hostage by the British. He served as a member of the Continental Congress, of which, in 1785, he was acting President. He wrote "A History of the Revolution," "A History of South Carolina," "A History of the United States," and a "Life of Washington."

Not less influential was Dr. Benjamin Rush, of Philadelphia. Of the highest professional and social position, Dr. Rush was not only a leader in his profession, but also in politics. His prominence led to his election to Con-

* Read at the semi-annual banquet of the Camden County (N. J.) Medical Society, on November 10, 1891.

gress, where he became distinguished as a fluent speaker and an ardent patriot. He served as surgeon-general of the middle division of the Continental army, and became a close friend of Washington. Together with Drs. Wolcott and Lyman Hall, of Connecticut, he signed the Declaration of Independence, and was a member of the Pennsylvania convention that ratified the Federal Constitution. In medicine Dr. Rush rose to the highest point of professional distinction. His polished manners, his classic attainments, and his love for his profession, caused his election to a professorship in the University of Pennsylvania, while his efforts in the yellow-fever epidemic, in 1793, when he was accredited with saving 6000 souls, have made him forever famous as a benefactor of mankind. Dr. Rush was one of the founders of the Philadelphia Dispensary and of Dickinson College. His contributions to medical literature were numerous, but his political essays and his public letters, his deeds in the field, and his orations in Congress, were the making of history.

I might further prolong the contributions of medical men to history, but the time assigned me will not permit. But there are some whose works are of such historic value that their names should not be omitted. Dr. Cadwallader Colden, of New York, wrote, in 1761, "The History of the Five Indian Nations;" Dr. Arthur Lee, of Virginia, famous as a revolutionary leader and secret agent of the government abroad, composed the historic letters of "Junius Americanus;" Dr. James Thatcher, of New England, a surgeon of the Continental army, wrote "A History of Plymouth;" Dr. Isaac S. Mulford, a former member of this Society, wrote "Civil and Political History of New Jersey;" Dr. Stephen Wickes, of Orange, N. J., wrote "The History of Medicine in New Jersey, and of the Medical Men, from the Settlement of the Province to 1800;" Dr. John R. Stevenson, a member of this Society, has written a "Medical History of Camden County;" Dr. Abram Clark, a "Medical History of Hudson County;" Dr. J. B. Somers, a "Medical History of Atlantic County;" Dr. John Blane, a "Medical History of Hunterdon County;" Dr. John S. Cook, with others, a "Medical History of Warren County;" Dr. Maurice Beesley, a "History of Cape May County;" Dr. Bateman, a "Medical History of Cumberland County;" and Dr. Forman, a "Medical History of Hunterdon County."

POETRY.

The first-fruits of American poetry were Indian ballads and patriotic songs. These soon gave way to poems of graceful form and wider interests, culminating in the masterpieces of the most illustrious of American poets,—William Cullen Bryant. More than any other, Bryant has consecrated by his poetic art the beauty of our land, the faith of our fathers, and the spirit of our institutions. In this field, where the sympathetic Longfellow, the graceful Willis, the imaginative Drake, the psychological Dana, the patriotic Whittier, the descriptive Lowell, the fearless Whitman, and the philosophical Bryant have set the standard for the nation, the medical profession has furnished several famous contributors.

Ranking among the first of American poets, both in point of time and of precedence, is Dr. Oliver Wendell Holmes, of Boston. To him may be conceded the place of honor among living poetic writers, unless that be reserved for the beloved patriot, John G. Whittier, or for our distinguished townsman, Walt Whitman. What Washington Irving is to American *belles-lettres*, Fenimore Cooper to American fiction, and George Bancroft to American history, Dr. Holmes is to American poetry. He is acknowledged to be the Alexander Pope of America, possessing the brilliant talents of the Englishman, unmarred by his physical and mental defects. You are familiar with his poetry, his novels, his essays, and his contributions to medical literature. In all of these departments he has received high honors. His charming and unaffected style, his clear insight into character, and his vivid delineations of New England scenes, mark him as the most popular of living American writers. Omitting Dr. James G. Holland, of New York, and Dr. S. Weir Mitchell, of Philadelphia, of whom I shall speak later, I have no hesitation in saying that Dr. Abram Coles, of Newark, N. J., is, next to Dr. Holmes, the most distinguished poet that the medical profession has produced. His literary distinction and his wealth proved no inducement to him to relax his professional work, for which he manifested a strong affection. He received the degree of A.M. from Rutgers, Ph.D. from Bucknell, and LL.D. from Princeton. In 1866, when President of our State Medical

Society, he delivered the annual address in poetry. The title of the poem was "The Microcosm," and in it he describes with classic dignity and sympathetic fervor the mission of the physician, and introduces, as illustrations, the famous paintings, "Vesalius Engaged in Dissecting," "Harvey Demonstrating the Circulation of the Blood," and "Rembrandt's Lessons in Anatomy." No one can read this poem without a profound respect for the elegant diction, the familiarity with the classics, and the touching love for his profession displayed by the author. Dr. Coles wrote many other poems, but his translations of Latin hymns and Hebrew psalms have made him the most famous of American translators.

It would require the entire time allowed me to recite the names and works of the poet-physicians of America. Yet gladly would I do this; for how grateful, how pleasing it is to know that in the medical profession, from among the men whose lives are spent under the dark shadows of pain and sorrow, there are found those who can push aside the solemn realities of life and break forth into joyous and poetic song! There are some names that cannot be omitted, without doing injustice to the subject. Drs. Samuel George Morton, William Hunt, Caspar Morris, Thomas Wistar, John K. Mitchell, J. Aitken Meigs, and S. Solis Cohen, of Philadelphia; Drs. James R. Orton, Benjamin Prime, and Samuel L. Mitchell, of New York; Dr. Jacob Bigelow, of Boston; Dr. M. N. Baskett, of Missouri; Dr. Lemuel Hopkins, of Hartford; Drs. James B. Coleman, of Trenton, and J. F. Duffield, of Orange, N. J., and many others, are known as graceful poets and verse-writers, and illustrate both the scholarship of the profession and the taste and spirit of their time.

FICTION.

Unlike poetry, the prose element of literature has predominated during years of peace in our national existence. The first English novel was written by Samuel Richardson, early in the eighteenth century. The first American novel was produced by Charles Brockden Brown, of Philadelphia, at the beginning of the nineteenth century. Since then there has been no lack of native fiction. Indeed, this is the day of novels; and the result of this craving for fiction is to weaken thought and ideas, and nourish the superficial in intellectual life. Romantic fiction reached its height in America in the novels of J. Fenimore Cooper and Nathaniel Hawthorne. The modern realistic school may be said to culminate in the productions of William Dean Howells. In this field of literature, which to-day is more fully occupied than any other except journalism, the medical profession has many distinguished representatives. Dr. Holmes is again a conspicuous figure. Dr. Robert Montgomery Bird, editor of the United States Gazette, about 1830, wrote a number of novels that rank with those of Gilmore Sims, Dana, and Longfellow. Dr. William Mayo's novels met with extraordinary sale. But there are three names that stand conspicuous in the front rank of men of letters which the medical profession may well be proud of. One has passed beyond the boundary-line of mortality, but still lives in his writings, to which are accorded a perennial popularity; I refer to Dr. J. G. Holland, editor of the Springfield Republican and of the first Scribner's Monthly. Dr. Holland was a novelist of high rank; a brilliant essayist; a poet both witty and wise, and a true friend to humanity. The other two are still in our midst, and active in our profession,—Drs. William A. Hammond, of New York, and S. Weir Mitchell, of Philadelphia. In the rôle of novelist Dr. Hammond has attained a widespread fame, and shows a high degree of literary skill. He possesses a clear and graceful style, a keen appreciation of nature's beauty and grandeur, and a natural talent for story-telling. His grasp of character is synthetic, and his methods are those of the late romantic school.

Dr. Mitchell, of whom Philadelphia has reason to be proud, possesses a most versatile genius. As a poet, he has won high praise for the beauty and elegance of his verses; as a dramatist, he has had the pleasure of witnessing the successful production of his play by a famous actor; as a novelist, he has gained laurels that are unfading. He ranks as one of the most powerful and skillful of fiction writers. He is a realist in the best sense of the word; a keen analyst; a master of plot and climax, and a close student of life in this complex nineteenth century. The novels of both Dr. Hammond and Dr. Mitchell reflect credit upon them, and honor upon the profession of which they are illustrious members.

OTHER DEPARTMENTS IN LITERATURE.

There are still several departments of literature in which American genius has been nobly illustrated by American physicians. In biography, Drs. Charles Caldwell, Samuel D. Gross, and J. M. Da Costa, and others have won lasting fame. In explorations, the works of Drs. Elisha Kent Kane and Isaac Israel Hayes have become standard authorities of reference. In magazine literature, Dr. Reynold Coates, a former member of this Society, won a wide and brilliant reputation. He wrote "Leaflets of Memory" and "The Gambler's Wife," in addition to a work on physiology and medical practice, and was an intimate associate of N. P. Willis and Edgar Allen Poe. In politics he also became distinguished, and, in 1852, was nominated for Vice-President on the Native American ticket, with Daniel Webster for President. In this department the contributions of Drs. Henry Hartshorne and Horatio Wood, of Philadelphia; Edward H. Clark and Henry J. Bigelow, of Boston; T. Gaillard Thomas, of New York; John S. Billings, of the United States army, and Edward Shippen, of the navy, and others have also made the medical profession famous.

And now I beg your indulgence while I briefly recite the work of a man for whom this Society entertains a profound respect,—I mean Dr. Ezra M. Hunt, of Trenton. Dr. Hunt has contributed to Biblical literature a work of two volumes, known as "Bible Notes for Daily Readers," which links together the writings of the old and the new dispensations, the history and prophecy of the Bible, rendering them intelligible to modern readers, and which has received the unstinted approval of the religious press. As one of the editors of the New York Independent, and as Secretary of the New Jersey State Board of Health, he has, perhaps, contributed more to sanitary literature than any man in America.

In this connection, let me ask, What have the medical men of New Jersey contributed to the common fund of knowledge? I shall not attempt to recite the names and works of all, for, did the time permit, I confess my inability to do so.

In History may be found the names of Isaac S. Mulford, Stephen Wickes, John R. Stevenson, Abram Clark, John Blane, John S. Cook, J. B. Somers, Maurice Beesley, Rush Bateman, and B. A. Watson, the author of "A Historical Sketch of Surgery."

In Poetry, the names of Abram Coles, James B. Coleman, the accomplished artist and brilliant author of the poem, "The Cities of the Plains," and J. F. Duffield, the author of the splendid poem, "The Physician Himself," published in the "Transactions of the State Society," in 1887.

In Theology, Isaac Brown, Jonathan Dickenson, the first President of Princeton; and Joseph F. Garrison, a member of this Society, professor of liturgics, canon law, and ecclesiastical polity in the Episcopal Divinity School of Philadelphia, and, perhaps, more thoroughly versed in church and Masonic history than any man in New Jersey.

In Legal Literature, Charles G. Garrison, member of the Supreme Court of New Jersey; J. S. Whitaker, member of the Court of Errors and Appeals; E. L. B. Wales, Judge J. R. Sickler, and others.

In Politics, United States Senators John Condit and Jonathan Elmer, Hon. Charles Skelton, Hon. George R. Robbins, and Gov. William A. Newell.

In Arms, Major Gen. Peter J. Stryker, Gen. Ebenezer Elmer, Gen. John Blane, Col. J. Howard Willetts, and Col. Franklin Gauntt.

In Journalism, E. P. Townsend, John Grimes (president of the first anti-slavery society in the State), William Perry Watson, and Joseph Parrish, the founder of The New Jersey Medical Reporter, in 1847, which, in 1860, was removed to Philadelphia by Dr. S. W. Butler, and given the name of The Medical and Surgical Reporter. In the "literature of inebriety" Dr. Parrish stands unrivaled.

In General Literature, Edgar Holden, Reynold Coates, Ezra M. Hunt, Maurice Beesley, Gen. McGill, Samuel H. Pennington, T. T. Price, H. Genet Taylor, B. A. Watson, D. C. English, James B. Coleman, Henry R. Baldwin, Abram Coles, Surgeon-Gen. Varick, T. F. Duffield, James S. Green, John Blane (senator, general, and historian), and Thomas F. Cullen, a former member of this Society, who was not only a brilliant musical composer, but a dramatist, and the well-known author of "Observations of the Civil War on American Medicine and Surgery."

In Teaching, Reynold Coates, Sylvester Birdsall, Dowling Benjamin, A. M. Mecray, O. B. Gross, William A. Davis, Daniel Strock,

Joseph H. Wills, and George Taylor Robinson, all members of this Society.

In Philanthropy, William O'Gorman, ex-President of the State Medical Society, Fellow of the Royal College of Surgeons of Ireland, and founder of St. Michael's Hospital at Newark; Sylvester H. Hunt, the founder of the Monmouth Memorial Hospital, and Richard M. Cooper, a former member of this Society, and founder of the Cooper Hospital of our city.

And now I know that I have trespassed too long upon your indulgence, and have greatly exceeded the time assigned me. My deep interest in the subject must alone plead my excuse. In conclusion, let me say, into whatever department of life you may look, whether in science, literature, art, theology, law, arms, philanthropy, teaching, discovery, or invention, you will find that the American physician has exerted an influence powerful and beneficent; and when the importance of the physical well-being of the people and the mighty powers of sanitary science are understood by government, the medical profession will advance into a still broader sphere than it has yet occupied.

ABSTRACTS.

THE ACTION OF BROMIDE OF STRONTIUM IN AFFECTIONS OF THE STOMACH.

At a meeting of the Academy of Medicine, October 27, 1891, M. Sée reported the results of his experiments with this salt. The diuretic effect of the salts of strontium observed by M. Laborde in the dog have not been verified in the human subject. But in those suffering from diseases of the kidneys and heart the digestive disturbances have been notably ameliorated. This fact led the speaker to make use of strontium in affections of the stomach. The daily use of the bromide of strontium has been from 2 to 4 grammes (30 to 60 grains), administered during the three meals. In 32 cases of dyspepsia, many of which were associated with excess of hydrochloric acid, rapid and decided relief was obtained, especially in regard to diminution of flatulence. In 8 cases in which hydrochloric acid was deficient the remedy produced the same effect as in those attended by excess of chlorine or hydrochloric acid, free or combined. In 6 cases, 1 of which was a case of nervous vomiting, the relief was complete. In 3 cases no effect resulted from the lactate of strontium, while the bromide proved efficacious. The bromide is useful in Bright's disease and in epilepsy. In the latter malady the bromide of calcium is at least equal in efficacy to the bromide of strontium.

M. Laborde remarked his satisfaction at the results of M. Sée. M. Féré, at a meeting of the Biological Society, has shown that the bromide of strontium, on account of its being so well tolerated by the stomach, may advantageously replace the bromide of potassium.—*Le Progrès Médical*, October 31, 1891.

DISCOVERY OF PSOROSPERMS IN A CASE OF PAGET'S DISEASE OF THE GLANS PENIS.

A patient had been treated in the clinic of Professor Pick, of Prague, for eczema of the glans penis, with a tendency to the proliferation of epithelium and the formation of tubercles. As he had also a phimosis, an operation was undertaken for its relief. The eczema improved so much that the patient was discharged. After some time, however, he returned on account of new growths on the glans and the frenulum, which had attained the size of pease. The tumors were removed, and the microscopical examination revealed a typical picture of carcinomatous growth, together with a small-celled infiltration expressive of eczema. From this appearance the process was recognized as Paget's disease. In addition to the nipple this malady has been recognized upon the scrotum, but the present case is the first reported in which it attacked the glans penis. In the epithelial proliferations psorosperms were found disposed as in sections taken from disease of the nipple and scrotum. After a short review of the present position of the subject of psorospermosis, the author declares that he has not yet been able to form a decided opinion as to the nature of those bodies.—*Deutsche Med. Zeitung*, November 5, 1891.

A NEW INTESTINAL ANTISEPTIC—BENZOATE OF BETA NAPHTHOL, OR BENZO NAPHTHOL.

Of this combination Yvon and Berlioz write as follows in Le Progrès Médical for November 14, 1891: "Salicylate of naphthol is not always an identical product. Neither does it fulfill all the therapeutic indications. There are cases in which a damaged kidney might be

additionally injured by the elimination of the salicylic acid. But other organic acids are capable of combining with beta-naphthol to form analogous compounds. Benzoic acid appeared, to the writers, the substance best adapted for the purpose, both from the chemical and therapeutical point of view. This acid has long yielded excellent results to those by whom it was employed. Its antiseptic power is superior to that of salicylic acid, while its toxicity is less. These facts led the authors to prepare a combination, to which they have given the name of benzoate of beta-naphthol, or benzo-naphthol. This body is obtained by treating, under determinate conditions, beta-naphthol with the chloride of benzoyl. Benzo-naphthol thus obtained is purified by successive solutions and crystallizations in boiling alcohol, or, preferably, by the intermediation of an alkaline solution.

Its formula is $C_{10}H_7O$ (C_7H_5O). It belongs to the same aromatic series as its components. Upon cooling the alcoholic solution it crystallizes as fine needles collected into nipple-shaped bundles. After purification by means of a very weak lixivium of sodium, it occurs in the form of a whitish, crystalline powder. The substance is devoid of taste or odor. It is almost completely insoluble in water at the ordinary temperature; at 22° C. (71.6° F.), 100 grammes of water contain but a centigramme. The solubility of benzo naphthol increases very rapidly with the temperature; it is but slightly soluble in ether. Chloroform is its best solvent, 100 grammes of that fluid, cold, containing 29 grammes.

Benzo-naphthol fuses at 110° C. (230° F.). A well-dried pastille of caustic potash, placed in a chloroform solution of benzo-naphthol, should not turn it blue upon simple boiling,—a fact which indicates the absence of free naphthol. It is indispensable that chloroform free from alcohol should be used. If the blue color supervenes after a certain time, it may be due to a decomposition produced during the reaction. In fine, benzo-naphthol is easily changed in the presence of alkalies, especially under the influence of heat.

Introduced into the alimentary canal, the benzoate of beta-naphthol is decomposed into beta-naphthol, which remains within the bowel, and benzoic acid, which is eliminated in the urine, after having combined with alkaline bases. A more or less considerable proportion of the acid, moreover, is converted into alkaline hippurates. The first therapeutic experiments were made by Dr. Gilbert, physician to the hospitals. He has demonstrated, in addition to the properties belonging to those drugs which produce intestinal antisepsis, a pronounced diuretic action and a considerable diminution in the toxicity of the urine of those patients who had absorbed benzo-naphthol. The experimental study of this substance was made in the Therapeutical Laboratory of the Faculty of Medicine by M. Domenici, under the direction of Dr. Gilbert. Experiments upon the guinea pig have shown that the action of benzoate of naphthol upon that animal is very variable, but considerable doses can be used before any toxic results are observed. This last fact warrants the employment of benzo-naphthol in large doses, without fear of evil consequences, the more so as benzoic and hippuric acids resulting from its decomposition in the economy are bodies normally eliminated by the kidneys, and therefore bring no strain upon those organs. Although the experiments in the use of benzoate of naphthol are not yet very numerous, the following conclusions may, nevertheless, be drawn: (1) its co-efficient of toxicity is very low; (2) its antiseptic power is comparable to that of other substances used for disinfecting the alimentary canal; (3) it facilitates diuresis and reduces considerably the toxicity of the urine; (4) the portion absorbed is rapidly thrown out by the urine; (5) in the administration of this medicament, we may readily ascend to the daily dose of 5 grammes (75 grains) for the adult, or 2 grammes (30 grains) for a child. It is preferably given in small quantities, often repeated; the dose of 50 centigrammes (7½ grains), or even 25 centigrammes (4 grains), in a cachet, or suspended in a suitable vehicle (syrup, for example), being sufficient in the majority of bases.

TWO CASES OF PARTIAL GANGRENE OF THE FOOT DUE TO HYPODERMATIC INJECTIONS OF ANTIPYRIN.

These were reported by M. Verneuil, at a meeting of the Academy of Medicine, November 3, 1891. The first case was that of a man suffering from sciatica consecutive to a fall upon the buttock. The second was that of a person attacked several years ago by local asphyxia of the extremities. There was no

taint or dyscrasia in either of the patients. The gangrene closely followed the injections, and it is fair to blame them, at least partially, for its production, the condition of the nerves in the 2 cases contributing to the result. This fact demonstrates that, if injections of antipyrin are to hold their place in therapeusis, it will be necessary to take into account the anatomical and functional condition of the nerves of the region in which they are practiced.

M. Dujardin Beaumetz remarked that these facts are exceptional. What should be said is, in a general way, that, when nutrition is lowered by any cause whatsoever, the injection should not be made at the seat of disease.—*Le Progrès Médical*, November 14, 1891.

CORNUTIN AS AN EFFICIENT REMEDY IN HÆMORRHAGE FROM THE URINARY AND SEXUAL APPARATUS.

Dr. Meisels, of Buda-Pesth, has studied the action of cornutin. According to Kobert, the three principal constituents of ergot are ergotinic acid, sphacelinic acid, and cornutin. The first of these produces dilatation of vessels, whereas the last two cause contraction of vessels and unstriped muscular tissue in general. The contraction due to sphacelinic acid is so extreme that gangrene is excited. It is, therefore, desirable to remove this dangerous constituent from ergot, or to isolate the less dangerous cornutin.

Pure cornutin is a brownish-gray, amorphous powder, almost insoluble in water. The muriate or citrate of cornutin, however, is more readily soluble. Experiments with cornutin demonstrated that it caused vascular contraction, whether given by the mouth or introduced directly into the circulation; the effect, in the former case, being longer delayed.

Following his experiments upon animals, the author made use of this substance in appropriate cases in human subjects,—that is to say, in hæmorrhages from the genito urinary organs,—and obtained a rapid cessation of the bleeding. He usually administered the drug in daily doses of 1 centigramme (about $\frac{1}{6}$ grain), divided into four portions. If necessary, its exhibition was continued for several days. He saw prompt action in 2 cases of gonorrhœa with hæmorrhage from the bladder or urethra, in 1 case of bleeding from cystitis in a puerperal woman, and in 1 case of hæmorrhage during the lying-in period from atony of the womb, with subinvolution. The administration of cornutin not only checked the hæmorrhage, but also promoted involution. The last case was that of a woman who, after her confinement, suffered for three months from bleeding, which was repeated every third or fourth day. After 3 centigrammes of cornutin had been given, in three days, the discharge of blood was suppressed, but recurred on the fifth day. During the next five days 1 centigramme was given daily; the bleeding then ceased entirely, and did not return.

Upon the ground of this experience, to which he has lately added 3 new cases of hæmorrhage from the womb cured by means of cornutin, the writer asks that the remedy be given a trial.—*Deutsche Med. Zeitung*, November 16, 1891.

TREATMENT OF BRIGHT'S DISEASE BY STRONTIUM.

At a meeting of the Therapeutical Society, November 12, 1891, M. C. Paul said: "M. Laborde has demonstrated the harmlessness of strontium. Contemporaneously with M. G. Sée, I conceived the idea of using it, in the form of its salts, as a succedaneum to sodium. The lactate of strontium is made by mixing the nitrate of strontium with lactic acid, or by saturating the latter substance with carbonate of strontium. The physiological action of the salts has been studied by M. Laborde They are not, even in large doses, dangerous to animals. They slightly increase diuresis and produce no emaciation in guinea-pigs and dogs.

"I have, in a communication to the Academy of Medicine, described the action of lactate of strontium in albuminuria. I have now been prescribing this substance for five months. Among my patients it generally caused a rapid reduction of the albumen to one-half. Continued for a month the albumen constantly decreased, and at the end of that period the remedy could be suspended. The amount of albumen did not then augment, but remained low. Together with the use of strontium, I place my patients upon a milk diet. In a case of nephritis, probably amyloid, in a scrofulous patient suffering from suppuration and fever, the result was excellent. In some rare cases the salts of strontium fail to produce a good effect. Strontium is not diuretic. If its ex-

hibition is too soon discontinued the albumen increases. It is indicated in rheumatic parenchymatous nephritis, scrofulous and gouty nephritis, and in the albuminuria of pregnant and puerperal women. I am not yet prepared to say whether it is beneficial in scarlatinous nephritis. The remedy is of no service after the manifestation of uræmia."

At the same session, M. Bocquillon exhibited a series of pure salts of strontium. Among these, the bromide, the chloride, the acetate, and the nitrate are soluble in 1½ parts of water, the iodide in 2 parts, the benzoate in 15. The borate and the phosphate of strontium are insoluble.—*Le Progrès Médical*, November 21, 1891.

PLUGGING OF THE POSTERIOR NARES FOR EPISTAXIS, FOLLOWED BY SUPPURATIVE OTITIS.

At a meeting of the Paris Society of Laryngology and Otology, M. Gellé remarked that the posterior plug leads to occlusion of the Eustachian tube by a mixture of blood and mucus, while the anterior plug causes the nasal chamber to be filled with the same material. Such a method is by no means without its inconveniences, and the tampon cannot be regarded as a rational treatment. The speaker then adduced the case of a man, 50 years of age, suffering from albuminuria, who was seized with an obstinate bleeding from the nose, for which his physician inserted the tampon. Symptoms of otitis were manifested on the second day, and by the fourth day the ear and the nose were full of pus.

M. Gouguenheim observed that plugging with hæmostatic gauze is a procedure which he has never seen give rise to accidents.—*Revue de Laryngology*, etc., December 1, 1891.

VASOMOTOR EFFECTS OF BACTERIAL PRODUCTS.

At a meeting of the Academy of Science, M. Bouchard spoke as follows:—

In inflammation, and, more generally, in the struggle of the organism against local infection, there are, among other conditions, three acts which succeed each other and unite in producing similar effects: diapedesis, the seeking of the bacteria by the leucocytes, and phagocytism. For Massart and Bordet the first two phases constitute but one, and the attraction exercised by the bacterial products for the leucocytes suffices to explain to them why the latter penetrate the vascular walls. But, upon this supposition, how are we to understand the escape of blood-plasma constituting inflammatory œdema, especially in view of the fact that this œdema may occur before or without diapedesis? The speaker has demonstrated the existence of a bacterial product which paralyzes the vaso-dilator centre and prevents diapedesis and the issue of blood-plasma. To this substance he has given the name of anectasine. By the side of this body exists another, the general action of which is excitant upon the vaso-dilator centre, and which he calls ectasine. This product is found in Koch's tuberculine. Its absorption produces in the rabbit, at the site of the local tuberculous lesions, vascular dilatation, serous exudation, and diapedesis of leucocytes. Examination of the eye-ground shows a notable dilatation of the vessels of the papilla of the optic nerve after the injection of tuberculine. When an intra venous injection of anectasine is made anæmia in a moment takes the place of hyperæmia of the retina. The bacillus of Koch, like the pyocyanic bacillus and the staphylococcus, secretes the substance which excites the vaso dilator centre.—*Le Progrès Médical*, November 21, 1891.

CURE OF LEG ULCERS BY EXTIRPATION OF THE VARICOSE VEINS.

At a meeting of the Surgical Society, November 25, 1891, M. Quénu read a report upon a paper by M. Cerné, bearing the above title. The case concerned was that of a cook aged 30 years, in whom M. Cerné, on account of a leg-ulcer, extirpated a mass of varicose veins and divided the internal saphena. The wounds were healed within three weeks, and soon after the ulcers disappeared. M. Cerné, in explaining the pathogenesis of the ulcers, attributed the principal rôle to periphlebitis. In this opinion M. Quénu could not concur, but believes it due to the influence of the nervous system acting through vasomotor paralysis. Persistent œdema is the precursor of the ulceration. M. Quénu cited the case of a patient having varicose ulcers. The ulcers were cured, but in about six weeks the person returned with a perforating ulcer of the foot. The œdema and ulceration are also observed among hysterical subjects. As to incision of the varicosities and resection of the internal saphena, this treatment, according to M.

Quénu, is indicated only in large ulcers accompanied by an extremely varicose condition of the veins.—*Le Progrès Médical*, November 28, 1891.

ALBUMINURIA IN MUMPS.

The case is reported, by Dr. H. Mettenheimer, of a 7 year-old girl, formerly healthy, admitted to the hospital with high fever (40.1° C.—104° F.) and the symptoms of a catarrhal angina. The urine contained a large quantity of albumen. On the following day the left parotid was swollen and excessively painful. The fever lasted but another day, the albuminuria four days, the swelling of the parotid three days. Convalescence was without trouble. Albuminuria is not extremely rare in mumps.—*Deutsche Med. Zeitung*, November 19, 1891.

ALTERATIONS OF GASTRIC CHEMISTRY IN CHLOROSIS.

This was the subject of remarks by M. Hayem before the Medical Society of the Hospitals, at the meeting, October 30, 1891. Chlorosis is one of those general diseases in which one often meets with gastro-intestinal troubles. M. Hayem had, with M. Winter, observed 72 patients, in whom he made an examination of the contents of the stomach. This list embraced 5 men and 67 women. Of this number 5 were cases of tuberculous chloro-anæmia. Only 9 had not taken iron before examination. Many were suffering from the first attack, while others had had several. Of these 72 cases, 36 had hyperpepsia, 6 an excess of hydrochloric acid, 28 hypopepsia (of the first and second degree, but not apepsia), and in 2 cases the gastric juice was normal. In 3 cases the chemical deviation was but slight, notwithstanding the intensity of the dyspeptic signs. In 34 cases there was no abnormal fermentation, while 36 were complicated with that phenomenon. The authors had found that subjects not dyspeptic might be attacked by chlorosis, since, when the malady is fully developed, the gastric chemistry may be normal or nearly normal. On the other hand, the intensity of the anæmia and that of the dyspeptic disorders are not closely related. The patient in whom chlorotic anæmia was most marked presented only chloro organic hyperpepsia, a type the least removed from the physiological state. In another, very slightly anæmic, the gastric juice was decidedly altered. In Paris, many persons, even boys, suffer from gastric disorder, generally hyperpepsia. Few boys, however, become chlorotic, and among these the globules are but little affected. There are, therefore, special conditions which predispose women to chloro-anæmia. The speaker regarded the habit of saturating chlorotic young girls with iron, arsenic, and cinchona wine as an important element in exciting dyspeptic troubles. On the contrary, anæmic boys are treated only for dyspepsia and neurasthenia. M. Hayem considers that chlorosis does not depend upon nervous disturbances. If chlorotic individuals are nervous or hysterical, these disorders are consecutive to the constitutional malady. The demonstration of this is seen in the disappearance of the nervous manifestations upon treatment of the chlorosis. The dyspepsia of adolescence predisposes to the development of chlorosis, and when this disease is instituted the dyspepsia is aggravated by injudicious treatment. When, in chlorotic patients, gastric difficulties are severe, they must be alleviated before beginning an active medication against chloro-anæmia.—*Le Progrès Médical*, November 14, 1891.

THERAPEUTIC NOTES.

LARYNGEAL CROUP.

Betz reports a case in which typical symptoms of laryngeal croup were very much improved in six hours by the following:—

℞	Sulphuric ether, . .	30 parts.
	Acetic ether, . . .	10 "
	Menthol, ...	1 part.

M. Sig.: Three drops inhaled from a chloroform inhaler every fifteen minutes.—*Boston Med. and Surg. Journal.*

FOR GONORRHŒA.

Dr. Netzetzky recommends the following injection in all stages of gonorrhœa:—

℞	Balsam copaibæ, .	4 grms. (f3j).
	Vitell. ovi, . .	1
	Aquæ destillat., .	180 grms. (f℥vj).

Fiant emulsio et adde:

	Ext. belladon.,	
	Zinci sulphat., āā	5 dgrms. (gr. viij).
	Aquæ laurocerasi,	4 " (gr. vj).

M. Sig.: Inject into the urethra four times a day.

FOR FLATULENT DYSPEPSIA.

Dr. H. A. Hare suggests:—

℞ Oleoresin capsici, . . gtt. x–xx.
Pancreatin, . . . gr. xx.
Zingiberis pulv.,
Carbon. ligni pulv., . āā gr. xl.

M. fiant pil. xx.
Sig.: One t. d.

TO COVER THE TASTE OF QUININE.

The following is M. Lutz's mixture: —

℞ Sulph. quiniæ, . . . gr. ss.
Dilute sulph. acid, . . gr. ss.
Ess. of mint, . . . gtt. v.
Sat. sol. saccharin., . . gr. x.
Dist. water, . . . ʒiss.

—*La Tribune Médicale.*

CYSTITIS.

℞ Aq. camphorici, gr. 8.0 (ʒij).
Glycerini, . gr. 50.0 (ʒiss, gr. xxx).
Aquæ dest., . gr. 450.0 (ʒxiv).

M. Sig: Inject into bladder.—*Times and Reg ; Internat. klin. Rundschau.*

FOR PAINLESS UTERINE DILATATION.

℞ Sulphuric ether, . . ʒiij.
Iodoformi, . . . ʒiij.
Pure cocaine, . . . ʒj.

M. Sig.: Steep in this the laminaria tents for eight days.—*Ibid*

CHOLAGOGUE POWDERS FOR HEPATIC COLIC.

℞ Benzoate of sodium,
Salicylate of sodium, āā gr. lxxv.
Powdered nux vomica, . gr. vij.

M. et div. in chart. no. xx.
Sig.: One powder thrice daily for two months.
—*Rev. Gén. de Clinique et de Thérapeutique.*

EMULSION OF IODOL.

Trouchet proposes:—

℞ Iodol, ... gr. xv.
Glycerin, ... ʒiiss.
Water, ... fʒv.
Acacia, ... gr. xxxviiss.

RACHITIS.

℞ Phosphorus, . . . gr. j.
Absolute alcohol, . . ʒv.
Spirits of peppermint, . gtt xxx.
Glycerin, ... ʒij.

Six drops of this mixture may be given in water three times a day, and after the lapse of one week another drop may be added.

ARISTOL FOR EPISTAXIS.

T. V. Fitzpatrick recommends insufflations of aristol for epistaxis.—*Lancet-Clinic.*

COLCHICINE.

Colchicine is rarely prescribed, but Dr. C. D. F. Phillips has furnished me with the following formula, which he has found useful in the treatment of gouty neuritis and allied affections:—

℞ Colchicine, . . . gr. $\frac{1}{60}$.
Sulphate of quinine, . gr. j.
Extract of colocynth, . gr. j.

Sig.: To make a pill, 1 to be taken three times a day.—MURRELL, in *Hospital Gazette.*

CONSTIPATION.

R Apioli puri
cryst., . gr. 1.50 (gr. xxiiss).
Ol. ricini, . gr. 100.00 (ʒiij, ʒj, gr. xl).
Ol. menth. pip., gtt. 2.00 (gtt. ij).

M. Sig.: Three to four tablespoonfuls daily.

℞ Apioli puri cryst., . gr. 0.25 (gr. iiiss).
Butyri cacao, . . gr. 2.00 (gr. xxx).

M. et ft. suppositor. dent. tal. dos. no. x.
Sig.: Rectal suppositories.—*Internat. klin. Rundschau.*

TÆNIACIDE.

Oleoresin of male fern is said to be best exhibited in combination with potassium bromide to secure the expulsion of the tape-worm. The object is to reduce peristaltic action.

DIPHTHERIA.

De Ruelle reports good results from the employment of the following in diphtheria:—

℞ Cyanide of mercury, . gr. ¾.
Alcohol at 80°, . . . ʒij.
Distilled water, . . ʒvj.

M. Sig.: One drachm every hour.

Improvement, manifest at once, is well established by the third day.—*Journal of Rhinology ; Times and Register.*

Dr. Ernst Zimmerman advises the following formula:—

℞ Acid. sulphurosi, . . fʒss.
Liquor potassæ, . . . gtt. xl.
Aquæ calcis, . . ad fʒiv.

Mix ; filter ; keep well corked, in a cool place. To be applied topically to the throat, by means of a sponge, probably every hour or two.—*Med. News.*

CHRONIC DIARRHŒA.

A prescription that has been used with much success for chronic diarrhœa is :—

℞ Iodoform, . . . gr. j.
Salol, ... gr. v.
M. et div. in pil. ij.
Sig.: Two pills t. d.—*The Prescription.*

EUCALYPTUS IN CATARRH OF THE RESPIRATORY TRACT AND OBSTINATE COUGH IN CHILDREN.

℞ Ammonium carbonate, . gr. viii–xvj.
Ammonium chloride, . gr. xxii–xlviij.
Fluid ext. of eucalyptus,. f℥iss.
Syrup of acacia,
Syrup of tolu, . āā ℥ss.
Water, . . . ad f℥ij.

M. Sig.: For a child, 2 years of age, with acute bronchial or laryngo-tracheal catarrh, one fluidrachm in milk or water every two, three, or four hours.

℞ Aromatic spt. of ammonia,
Camph. tinct. of opium, āā ℥ij.
Fluid ext. of eucalyptus, . f℥iss.
Syrup of acacia,
Syrup of wild cherry, . āā f℥ss.
Water, ... ad f℥ij.

M. Sig.: For a child with a subacute bronchial catarrh, one fluidrachm in water every two, three, or four hours.—S. Solis Cohen, in *Medical News.*

FLATULENCE.

℞ Naphthol, . . . ℥j.
Carb. magnesium, . . ℥j.
Powd. charcoal, . . ℥j.
Ess. peppermint, . . gtt. ij.

M. Sig.: This is to be divided into 15 powders, and one taken at the beginning of each meal.

DIABETES MELLITUS.

Prof. Da Costa says that salicylate of sodium, in doses of 15 grains three times a day, will markedly control the formation of sugar.

DIABETES INSIPIDUS.

℞ Antipyrin, . . . gr. v.
Quininæ sulph , . . gr. ij.

M. To be given twice a day, and, if this does not act satisfactorily, increased to three times a day.—Prof. J. M. Da Costa.

HÆMOPTYSIS.

℞ Essent. terebinth.,
Ol. amygdalæ, . āā 5 grms. (f℥i¼).
Mucilagin. acaciæ,
Syrup simplic., . āā 20 grms. (f ℥v).
Aquæ destillat., . 200 grms. (f℥vij).

M. Sig.: A teaspoonful every half-hour.
—*Cincinnati Lancet-Clinic.*

SANTAL-OIL FOR COUGH.

Curtin (Philada. Hosp. Rep.) finds that sandal-wood-oil often gives relief to the cough in phthisis, catarrhal pneumonia, chronic bronchitis, with asthma and influenza. It is given on sugar or floated on water.

CHRONIC PROSTATITIS.

℞ Iodoform, ... gr. xx.
Olive-oil, ... ℥ij.
Cacao-butter, . . . q. s.

Sig.: Divide into 20 suppositories, one to be inserted at bed-time.

FOR RIGID PERINÆUM.

℞ Chloroformi, . . . ℥ij.
Æther. sulph., . . . ℥ij.
Aquæ cologni.,. . . Oj.

M. Sig.: Apply locally. It acts quickly and well.—*Weekly Med. Review.*

ANTIPYRIN.

M. Guibert (La Semaine Médicale) states that antipyrin, in doses of 4 grains every two hours, avoiding the administration very near meal-time, is of the greatest service in the suppression of the lacteal secretion in newly delivered patients, and that the remedy is void of danger.—*Indiana Med. Journ.*

BILIOUS HEADACHE.

℞ Pulv. opii,
Pulv. ipecac., . . āā gr. ⅛.
Massæ hydrarg., . . gr. ½.
Misce et ft. tab. trit. no. j.
—*N. Y. Med. Journal.*

ANGINA PECTORIS.

℞ Tinct. digitalis, . . . ♏v.
Glonoin (cent. sol.), . . ♏j.
Tr. cinchonæ, . . ad ℥j.

M. Sig.: One dose, to be given four times a day.—Dr. James K. Crook, in *Weekly Med. Review.*

A PRACTICABLE AND PAINLESS METHOD OF USING IODINE HYPODERMATICALLY.

Dr. A. O. Squier, in carrying out the Shurley-Gibbes treatment, recommends the following preparation :—

℞ Eucalyptol, pure, . . ♏xxxij.
Guaiacol, pure, . . . ♏xvj.
Iodoform, ... gr. viij.
Iodine, ... gr. iv.
Ol. amygdal. dulc. (sterilized), . . q. s. ad ℥j.

Sig.: For hypodermatic use, 10 to 30 minims daily, or alternating with gold and sodium solution, as desired.

SYRUP TRIFOLIUM COMPOUND.

In the Medical Age, Dr. W. Thornton Parker writes of the success which has attended his use of this preparation in upward of 100 cases, mostly obstinate rheumatic affections. He instances especially 4 cases in which the remedy proved of marked benefit,—one of chronic eczema, a second of severe and obstinate rheumatism, a third of menstrual disorder associated with profound anæmia, and the fourth a case of tertiary syphilis.

FETID PERSPIRING FEET.

Dr. Bordet gives the following formula:—

℞ French chalk, . . . 40 parts.
Subnitrate of bismuth, . 45 parts.
Permanganate of potassium, 13 parts.
Salicylate of sodium, . . 2 parts.

M. This powder should be dusted daily into the stockings. The feet should be washed every morning and evening, and, after washing, rubbed with alcohol.

The method of treatment recommended by Unna is as follows:—

℞ Ichthyol, ... 5 parts.
Turpentine, . . . 5 parts.
Zinc ointment, . . . 10 parts.

M. Apply after the feet have been bathed in water, to which a little vinegar, mustard, or spirits of campor has been added. During the day they may be dusted with the following:—

Powdered mustard, . 1 part.
French chalk, . . . 30 parts.—M.

—*Pharm. Era.*

BROMOL (OR TRIBROMOPHENOL) AS A LOCAL ANTISEPTIC.

C. Rademaker recommends for wounds and ulcers:—

℞ Bromol, . . . 5 grms.
Olive-oil, . . . 150 grms.—M.

℞ Bromol, . . . 4 grms.
Vaselin, . . . 30 grms.—M.

DIPHTHERIA.

Rademaker recommends the following in the local treatment of this disease:—

℞ Bromol, . . . 1 part.
Glycerin, . . . 25 parts.—M.

—*Journal de Médecine de Paris.*

WHITE OF EGGS FOR SORE NIPPLES.

Dr. Frank Van Allen, in the New York Medical Journal, speaks of the good effect of painting the nipples several times a day with the white of egg. The albuminous covering is soothing, and under it the nipple soon heals.

HEART TONIC.

For a continued effect, Dr. William Henry Porter, of the New York Post-Graduate Medical School, advises:—

℞ Tr. belladonnæ, . . . fʒii–iij.
Tr. opii deod., . . . fʒii–iv.
Tr. nucis vomicæ, . . fʒiv–vj.
Tr. gentian co., . q. s. ad fʒiij.

Sig.: One fluidrachm every four hours.

TYPHOID FEVER.

In an interesting article on this disease, Burney Yeo mentions with approval the following prescription by Dr. Wilks:—

℞ Sulphurous acid, . . ♏xx.
Water, ... fʒj.
Syr. aurant. cort., . . fʒij.

Sig.: At a dose every four hours.

Yeo has tested chlorine water, and obtains excellent results. His prescription is as follows:—

℞ Potass. chloratis, . . gr. xxx.
Ac. hydrochlor. fort., . ♏ xl.

Place in a 12-ounce bottle, and cork. When filled with gas, add water gradually, and shake. Then add:—

℞ Quin. sulph., . . gr. xxiv–xxxvj.
Syr. aurant. cort., . ʒj.

Sig.: One ounce every two, three, or four hours, according to the severity of the case.

ANGINA PECTORIS.

A writer in the Revue de Médecine recommends cocaine, in the dose of $\frac{1}{3}$ to $\frac{1}{2}$ grain, three or four times daily.

COMEDONES.

Unna makes use of:—

℞ Wool-fat, ... 10.
Vaselin, ... 20.
Hydrogen peroxide, . . 20–40.—M.

This mixture is to be applied to the affected parts and allowed to remain, which can be easily done if the application is made at night. If it can also be applied during the day-time, a further advantageous action is secured.

DUBOISIN AS A SEDATIVE AND HYPNOTIC.

Ostermayer regards the sulphate of duboisin as superior to hyoscine in not having the inconveniences of the latter drug. It is chiefly a hypnotic, producing sleep in from twenty to thirty minutes, and is to be given in doses varying from 1 to 3 milligrammes, according to the character of the case. It is said to pro-

duce no dangerous or disagreeable symptoms, and, although continuous use produces tolerance, by leaving it off for a short time, the full effect can be again obtained.—*Times and Register.*

DIPHTHERIA AND CROUP.

Dr. Gibert, of Geneva, commends:—

℞	Pilocarpin, ...	2 cgrms.
	Ammon. carb., . . .	2 grms.
	Potass. chlorat., . . .	3 grms.
	Syrup. polygalæ, . .	30 grms.
	Sp. vini gallic., . . .	20 grms.
	Aquæ, ...	130 grms.

M. Dose: A tablespoonful, repeated hourly until perspiration is produced.—*Le Progrès Médicale.*

CHLORALAMID IN EPILEPSY.

At the October meeting of the New York Academy of Medicine, Dr. Chas. L. Dana, Professor of Diseases of the Mind and Nervous System, New York Post Graduate Medical School, in speaking of the symptomatic treatment of epilepsy, refers to chloralamid as follows: "The most valuable adjuvant was hydrate of chloral, but I have found a new drug in chloralamid, which does all the good ascribed to the former drug, without affecting the heart or circulation."

ECZEMA AND PSORIASIS.

To remove the abnormal scaly formation of the skin and assist other treatment, the following has been found remarkably successful:—

℞ Papoid,
Boracic acid, . āā ʒss.
Glycerin,
Aqua camphor, . āā q. s. to make a paste.

Apply night and morning, allowing the paste to dry on the skin.

It has been reported that the above alone will cure nearly all cases of eczema.—Dr. W. M. Fleming, New York.

EXALGINE.

Exalgine is proving of value in neuralgia and rheumatism, in doses of 2 grains from three to six times a day.

HYDROCHLORIC ACID IN DIPHTHERIA.

The experiments of Roux and Versin have established that the virulence of diphtheritic toxines may be greatly diminished by adding to the products of the secretions of the bacteria a small quantity of acid. Starting with this idea, Dr. Krazenski has employed hydrochloric acid in the treatment of 6 cases of croup in children from 6 months to 3 years of age, and in 5 cases of diphtheritic angina, 2 cases occurring in children and 3 in adults.

The following formulæ were employed:—

℞	Perchloride of iron, .	1 drachm.
	Medicinal hydrochloric acid, ...	15 minims.
	Distilled water, . .	6 ounces.

M. Sig.: Take at first 1 teaspoonful every fifteen minutes for four doses, then every thirty minutes for three or four hours; finally, the dose is repeated every hour.

℞	Perchloride of iron, .	2 drachms.
	Hydrochloric acid, . .	15 minims.
	Distilled water, . .	1 ounce.

M. Sig.: Apply locally to the parts every two hours, in diphtheritic angina.

In addition, the author employed gargarisms, with a solution of boric acid (4 per cent.), and in cases of croup a solution of sulphate of copper (1.5 per cent.), taken internally as an emetic when the necessity arises.

In 21 cases the duration of the treatment varied from two to five days. All the patients recovered. Of the 5 cases of diphtheritic angina, in 4 cases the false membranes definitely disappeared at the end of from twenty-four to forty-eight hours. In the fifth case one week elapsed before the cure. The cases of croup were cured in from three to five days.—Translated by Dr. A. E. Roussel, in the *Times and Register.*

URTICARIA.

℞	Iodol,	
	Chloral, . . .	āā ʒss.
	Tarro-petrolene, No. 1, .	ʒj.

M. Ft. oint.
Sig.: Apply twice daily in gentle friction.

There was Urine in it.—A dispensary patient, whose sufferings from gravel were partly real, but also hypochondriacal, came to the dispensary one day looking twice as lugubrious as usual, and told me that all the previous day he had been passing blood, water, and urine. "The way I know this," he continued, "is, because the night before last I was at my lodge, and while there passed some water in a cup. A young man from Blank Medical College, who happened to be there, looked at it, and said there was urine in it. 'How do you know?' I asked. 'I smell it!' he answered."—*Ex.*

THE
Medical Bulletin.

JOHN V. SHOEMAKER, A.M., M.D., Editor.
F. A. DAVIS, Publisher.
S. C. BERGER, Business Manager.

Philadelphia, Jan., 1892.

THE PHILADELPHIA BOURSE.

THOUGH our subject should seem at first glance to belong anywhere than in a medical journal, yet there are two very excellent reasons which render it appropriate for us to discuss this project in these pages. In the first place, the physician, no less than the lawyer, the divine, and the merchant, is, or should be, interested in every undertaking which promises to advance the interests of the community in which his lot is cast. Upon this self-evident proposition there is no need for us to dilate. In the second place, our profession teaches us to think of any great public movement in relation to its influence upon the public health.

In general terms we may say, the larger and more crowded the city, the more unhygienic will be the surroundings and the mode of life of each inhabitant. Narrow streets, high buildings set side by side in solid blocks, honeycombed by courts and alley-ways, imperfect systems of drainage and garbage-collection, a diminished allotment of cubic inches of oxygen, an atmosphere crowded with pathogenetic micro-organisms are facts and conditions incident to the daily life of dwellers in great cities. Anæmia, indigestion, scrofula, infectious fevers, and tuberculosis are bred on a grand scale. The effect of malnutrition falls heavily upon the nervous system. Neurasthenia, neuralgia, hypochondria, insomnia, epilepsy, and insanity; a diseased craving for tobacco, alcoholic drink, narcotics, sensuous pleasures, and mental excitements are among the consequences of lowered vitality. Frail constitutions, predisposed to nervous ailments, are handed down from generation to generation, and the evil is only too apt to increase with each descent.

The subtle influence of climate undoubtedly counts for much in making Americans, no matter what their original derivation, a nervous people; but it is difficult, if not impossible, to estimate the relative effect of this factor. Moreover, in a land of continental area, almost every variety of climate is found, from the cold or warm humidity of the coasts to the cold or hot aridity of the great central plateau. It is, however, to the strenuous and ceaseless energy of three generations in developing the resources of this great country that we must look for the rational explanation of our intense nervous organization. The grand possibilities in the United States, material, financial, social, and political; the rapid kaleidoscopic changes from poverty to wealth, and, mayhap, back again to poverty; the swift alternations of success and failure, of hope and disappointment, keep our business men incessantly on the strain. As development increases, as the country grows in wealth and population, the keener and more fatal grows commercial competition. All these circumstances produce in us a life of hurry, restlessness, and excitement. And when to all the foregoing elements we add the eager desire to mount the social ladder, it will be seen that the meaning of the word leisure bids fair to be forgotten or to be condemned as synonymous with that of idleness.

That this picture, briefly sketched in outline, is not overdrawn, all physicians know. It is not that Americans are, above all, greedy for wealth. Our splendidy-successful men are too busy to enjoy their wealth. But we are all in the race for success, each struggling to pass his fellows in the whirl and rush; we animate and excite each other, strain every nerve, and the consequence is a huge waste of vitality. We burn the candle at both ends. After a day of labor and excitement, with, perhaps, a hasty and ill-digested luncheon, an ample and ill-digested dinner, a night spent in attendance upon some social festivity or the concoction of business schemes, we go to bed, not to sleep, but lie awake, restless, counting the hours, hatching new projects, carrying on our labors again in our dreams, rising, unrefreshed and jaded, to take our place in the daily treadmill.

Nothing is more dignified than conscientiously performed work. There may seem to be much difference in the comparative importance of the different departments of labor; but this difference, in an absolute sense, is perhaps more apparent than real. We are gifted with different powers and capabilities. One designs the bridge, the edifice, the railroad, and the many execute the designs. Upon some is bestowed intellectual superiority, while the mass of mankind are devoted to manual toil. But, to till the farm; to construct the bridge, or the railway; to carry on the numerous handicrafts of modern society; to execute, in other words, the work of the world, brings us all together, intellectual and physical workers, designers and executors, to constitute one tremendous macrocosm of labor.

Our special lot, as physicians, is to take care of the laborers, to the end that their tasks may be promptly accomplished. This, as we know, but as the general public does not so thoroughly realize, is better accomplished by keeping them well than by curing them when they have fallen ill. The medical profession, in a spirit of self-abnegation, by means of lectures, writings, health boards, and sanitary congresses, strives to make general an understanding of the laws of health. The more successful we are in accomplishing this object, the more economically will labor be performed, the larger will be the return in proportion to the strength of body and mind exerted. It is sad to reflect how much capacity is thrown away practically to no purpose. In short, if a man work all day he ought to accomplish something; he ought to be able to point to some result. He should not have merely fatigue in exchange for his bodily or mental toil. Lost time can never be recovered; wasted labor can never be regained.

And thus our course of thought brings us to the subject expressed by the title of this editorial. Philadelphia is a large and populous city. Its streets are, as a rule, too narrow, but, nevertheless, it covers a wide area. A great manufacturing centre, its shops and factories are spread from one end to the other; a great distributing centre, its warehouses, even in the same line of trade, may be separated by miles. The consequences are obvious. Buyers waste their time, their strength, their money, or their health in their efforts to cover such a large territory. Men go from place to place to look at goods or to have business interviews; they may fail in keeping their appointments, or they may fail to find the man or men they seek, and time and effort are spent with no adequate result.

It is now proposed, in behalf of the business interests of this community, to establish a Bourse,—a place for the exchange not only of stocks and securities, but also of commodities. The scheme contemplates the erection of a large building, in which there shall be sufficient space to accommodate our chief mercantile houses, according to their requirements, with desk-room, or with room enough to display samples of the goods in which they deal. In this building, every day, during certain hours, our merchants, or their accredited representatives, shall attend for the purpose of facilitating the interchange of stocks or commodities, or the negotiation of contracts. With the business details of the project we need not here further concern ourselves, but the spirit of this article is to indicate its advantages from the medical point of view. Every student learns the importance of concentration of the attention. Ability to concentrate the mind is, perhaps, above all other circumstances, that which contributes to the successful prosecution of any task. In the proposed concentration of business energy we see analogous advantages. Attention and concentration of mind are not the factors which shorten life, but useless bustle, haste, excitement, and disappointment. If the plan of the Bourse be successfully carried into execution, the volume of trade can be indefinitely increased, with, coincidently, a great saving of time, labor, doubt, and anxiety. In other words, with both buyer and seller, the time devoted to the actual, fundamental responsibilities of business may be notably shortened.

Our further advice to mercantile men would be to avail themselves of improved opportunity for leisure. When the goods are sold, when the negotiations are completed, transmit the orders, but seek not the warehouse or the factory. Take a horse-back ride in the Park, a walk in the suburbs, or travel in the cars to a

rural home, and seek an acquaintance with nature. Leave city and business out of thought for awhile; let ambition sleep until to-morrow. By such methods, merchants can direct great enterprises year after year, reaching the Psalmist's term of life, or more, and not present the sad spectacle of a break-down at 50 from overwork.

We would preach to the American people leisure and temperance. Rest after toil. Observe temperance in all things, even in work. Regularity and system accomplish wonders, and yet leave time for needed rest. Strive with energy during business hours, but when those hours are ended dismiss business from the mind.

A GRAND BOULEVARD TO THE PARK.

As men mass themselves together, as, in well-chosen situations, villages grow into towns, and from the latter, in the progress of time, cities are evolved, with all their diversified interests, serious problems arise. The streets and paving, the dwellings and public edifices suited to the small settlement no longer answer the requirements of the large municipality. Wisdom and enterprise are, therefore, confronted with the question, How may the old modes of civic life be adapted to the new? What modifications, what entire changes are needed? Problems of sanitation come to the front. How shall the people be most comfortably lodged? How shall they obtain healthy food and drink, be transported from place of business to their homes? What is to be done with garbage, and how are streets to be kept clean?

It is much to be deplored that our older cities have followed too closely an antique European model. They had an abundance of room in which to expand, and yet, as a rule, buildings are closely packed and streets are far too narrow. These disadvantages are increased by the tendency which has grown up in late years to erect edifices which scale the sky, and city vies with city in putting up ten- and twelve-storied edifices. The antiquated cobble-stones still pave most of the road-ways of Philadelphia, while the worth of improved pavements is, for the most part, lost, owing to the patch-work manner in which they are distributed. We have not, it is true, the lanes of the older cities of Europe. Nevertheless, most of our streets lack width. Wide streets, in addition to being beautiful to the eye, are healthful. The air has a free circulation; impurities are carried away; pedestrians obtain the benefit of a fresh air; stores and houses are ventilated.

We are fortunate in possessing one of the finest parks in the world,—one, moreover, not of artificial creation, but a tract of nature, with stream and virgin forest, inclosed in our midst. The beauty and the extent of our Park make it a favorite summer resort of a large class of our population. The sylvan dells, the loveliness of the Wissahickon, are spots to be held long in fond remembrance. To a city of a million souls, rapidly extending itself around the margins of the Park, this pleasure-ground is of inestimable benefit. The beautiful Schuylkill River, winding among wooded hills, cannot be excelled as a waterway for oarsmen. The vigor and the joy to be had upon the river are known to many of our youth, but the number of those who avail themselves of this privilege is far too limited.

Much more could be justly said in praise of the Park as a pleasure-ground and municipal health resort; and, doubtless, it is sought and appreciated on summer Sundays by great multitudes. This opens up another consideration: the street-car journey to and from the Park is a veritable infliction, and keeps many at home who would gladly enjoy a brief outing. Cars loaded to their utmost capacity with a struggling, perspiring mass of humanity, make one long for the Parisian vehicle, which the American visitor complained was always bound for "complet." If one is fortunate enough to own a carriage, the jolting over stony streets before the entrance is gained is a discount on the pleasure of the ride.

In order to remedy the defects of which we complain, a most important and promising proposal has been made,—the construction, namely, of a grand boulevard, which shall run diagonally from the City-Hall to the Park. The advantages of such an avenue are numerous and great. We need not repeat what has been said in praise of the healthfulness of wide streets, but will venture to speak briefly of

another aspect of the same subject. To a large and densely populated part of Philadelphia the Park gates will be brought within accessible distance. A smoothly paved roadway will invite the equestrian and the carriage-rider. Many a wearied merchant or professional man, many an invalid will gain a physical benefit, as well as gratification, by means which will surpass all the combinations of the Pharmacopœia. It is not, however, the well-being of the wealthier classes that we have principally in mind. To those of moderate means such a promenade will be an invaluable boon. Conceive the benefit to infants and children of a cheerful progress along the avenue as far, perhaps, as the great Park play-ground! If the distance be too great for young children to accomplish, the thoroughfare will, at all events, be really an extension of the Park into the heart of the city. Here many a tired mother may wheel her babe to obtain change,—a fresher air, a sight of the promenade and driving, a rest upon a bench. Mother and child return home improved from the walk. As much may be said concerning the laborer or mechanic.

The first cost of such schemes as we have outlined is, indeed, great; but, it must be remembered, the corresponding gain is great, and is of such a kind, moreover, as to rise above a mere money question.

The Bourse and the Boulevard will be a decided gain to the health of the entire community,—rich and poor, high and low. Health is surely worth more than dollars and cents. A healthy population is, comparatively speaking, a contented, industrious, sober, and honest population. Crime diminishes, the expenses of the courts are reduced, the city has fewer paupers to support and criminals to lodge.

In conclusion, we shall, in a few words, advance another thought,—not strictly belonging to the medical aspect of the question, but pertinent to the general subject from the viewpoint of the citizen, whatever his occupation. We are proud of our city. It has a long and honorable history; it has bred noble souls, has advanced great undertakings, has fostered art, literature, science, and religion, has met and fulfilled critical responsibilities. And yet, withal, we must confess that Philadelphia has lost prestige in the business world. We have lost our carrying-trade upon the ocean, and, though our factories turn out abundant products, they often find their way into the markets of the world through other than home channels. We have large importing houses, and yet they must, in great measure, content themselves with a local trade. The people of Philadelphia are not slothful, but they seem to lack proper self-assertion. The city is not advertised. A Western town of 25,000 inhabitants makes more noise in the world, and is eager to avail itself of every new device in public sanitation. We are no advocates of a game of brag, but, when we know that we have the substance, it is mock-humility not to apprise the world of the fact. New enterprises are sadly needed here, in order to restore to the city its legitimate glory. Nor will this glory be merely sentimental, and without material profit. Philadelphia will regain its due share of domestic and foreign trade.

THE enterprises discussed in the foregoing articles, though primarily of local importance, are of interest to every large and growing city in the country,—North, South, East, and West. The intricate problems of municipal development and improvement are not completely solved in single communities. Each, as it rivals, must borrow from its competitors. Improved devices for carrying on business, for promoting the prosperity and health of cities, whether originating here or abroad, are speedily copied, and measures found successful will be universally adopted.

ULCERATIVE ENDOCARDITIS ORIGINATING IN SUPPURATION OF THE GENITAL ORGANS.—In a recent clinical lecture, reported in the Medical Age, Professor Lancereaux describes two cases. In the first, pus could be expressed from the distended glandular orifices of the prostate; the two vasa deferentia and the two vesiculæ seminales were filled with a thick and brownish pus; the left epididymis was transformed into a purulent focus, evidently old, with thickened walls. In the second case the bladder was very much dilated, and contained a lactescent fluid. The muscular coat was very much thickened and infiltrated with pus. There was perivesical suppuration at a level with the neck; the prostate was enlarged, and its right lobe was in a state of purulent transformation.

CORRESPONDENCE.

Editor of the Medical Bulletin:

DEAR SIR:—A few days ago there came to my office a case which might be of interest to the medical profession at large. It came in the form of a little girl, 12 years old, who had the misfortune of falling and badly lacerating the tongue six years ago, at the same time knocking the central incisors out of the upper jaw. The laceration in the tongue was closed, by means of sutures, by the family physician. It united by first intention, and never gave any trouble until a few days ago, when she came to my office complaining of something being in her tongue. Upon examination the diagnosis was a foreign body near the anterior border of the tongue. A small incision was made and the hard body extracted, which was found to be a tooth. Undoubtedly one of the teeth had been inclosed there six years ago, and remained unnoticed until the present time. Very truly yours,

E. B. WENNER, M.D.

NUREMBERG, PA., December 3, 1891.

AN ANENCEPHALIC MONSTER.

Editor of the Medical Bulletin:

DEAR SIR:—I thought I would report to you a case of monstrosity of the anencephalic kind, which I delivered on the 13th inst., the mother being 19 years of age, and this the second child. There were none of the upper cranial bones present, nor was the brain developed. The two parietal, the frontal and occipital bones were absent, and there was no sign of development of their centres. There was also a complication of spina bifida of the upper part of the cervical vertebra to the extent of one inch. The creature lived about fifteen minutes, and crept around. It did not or could not cry. Its face from the eyes down and its body were perfectly developed, and it weighed about seven and one-half pounds.

The woman had a fall during the first month of pregnancy, which might have caused the arrest in development. Her labors have been complicated with too much liquor amnii—about two gallons at the last birth. Yours truly,

DR. H. C. W. SHOWALTER.

NEW HOLLAND, PA.

Editor of the Medical Bulletin:

Dr. O'Brien has treated 32 patients having gonorrhœa by injections with sea-water, repeated about eight times a day, recovery, as a rule, taking place at the eighth day of the treatment. The beneficial effect of the treatment is more rapid and complete when the injection is made tepid. He explains the effect of sea-water by its alkalinity and antiseptic character.

Dr. Castellan points out the fact that gonorrhœal pus has an acid reaction, as is seen from its effect on litmus-paper. To be sure that the acidity is solely due to the pus, and not influenced by an admixture of urine, he experimented upon pus obtained at the end of the third hour after micturition. The injection of a 1-per-cent. bicarbonate-of-soda solution rapidly diminishes the amount of the secreted pus and the pain on urination. By this mode of treatment recovery occurs, on the average, at the twentieth day.

Dr. Balzer and Louplet, at the convention of the French dermatologists and syphilographists, have made public their views of gonorrhœal albuminuria. Its amount, as well as its course, is not constant, being intermittent and at times remittent. Its duration varied from four to five days to three weeks. If albuminuria is present, balsamics are contra-indicated, and they advise rest and a milk diet. And, in conclusion, they call special attention to the importance of examining the urine of such patients, quoting the expression of Rayer: "Kidney complications in venereal diseases are not so infrequent as generally supposed by many practitioners." Very truly yours,

S. SEILIKOVITCH.

338 SPRUCE STREET, PHILADELPHIA, November 14, 1891.

MEDICAL NEWS AND MISCELLANY.

DR. A. G. PERSON has removed from Luling, Texas, to Fremont, N. C.

DR. W. M. ANGNEY has resigned as vaccine physician of the Fourth District.

IT is said that Prof. William F. Waugh will locate in Chicago after January 1, 1892.

THE Polyclinic Hospital of Philadelphia had Thursday, November 19th, as donation day.

PROF. W. T. BRIGGS, of Nashville, Tenn., has fully recovered from his recent severe illness.

THE American Gynæcological Journal is the new name of the former Journal of Gynæcology.

THE German Public Health Association will hold its Annual Meeting next year at Würzburg.

CANADIAN trains are to be inspected at Detroit and Port Huron, to prevent small-pox importation.

INDIAN TERRITORY MEDICAL ASSOCIATION met in Muskogee, I. T., Tuesday, December 8, 1891.

DR. WORTH FOSTER, of 133 Wylie Avenue, Pittsburgh, recently spent a few days in Philadelphia.

DR. AUSTIN FLINT has been decorated by Venezuela, and been accorded the Order of the Liberator.

DR. LARABRIE has been given charge of the course of clinical surgery in the Medical School of Nantes.

DR. ALEXANDER MCALISTER has removed to 582 Federal Street, above Broadway, Camden, N. J.

DR. A. D. ROCKWELL has resigned the Chair of Electro-Therapeutics at the New York Post-Graduate School.

IBSEN is said to have commenced as a druggist's apprentice in Norway, and was afterward a medical student.

THE death is announced of the Hon. George Le Fevre, M.D., member of the Legislative Council of Victoria.

A. D. BLACKADER, M.D., has been appointed to the Chair of Materia Medica and Therapeutics in McGill University.

GUSSEROW recently celebrated the twenty-fifth anniversary of his accession to the Chair of Gynæcology at Berlin.

DR. E. B. GLEASON, who practices specially laryngology, has removed to 41 South Nineteenth Street, Philadelphia.

THE numerous friends of Dr. R. Beverly Cole will be glad to learn that he has recovered from his late attack of serious illness.

DR. ELMER E. HORN (Medico-Chi., 1889) was married to Miss Lulu Williamson, of Salladasburg, Pa., on December 5th.

CHICAGO Scotchmen have announced their intention to commemorate their immortal poet by building the Burns free hospital.

THE Emperor of Austria has conferred a patent of nobility on Professor Böhm, the Director of the General Hospital of Vienna.

R. F. RUTTAN, M.D., has been appointed Assistant Professor of Chemistry and Registrar in the Medical Faculty of McGill University.

THE Medical Society of the Missouri Valley convened in Lincoln, Neb., Thursday evening, December 17th, and continued in session on the 18th.

THE first lady-doctor educated in the Glasgow Medical School—Miss Christie—graduated recently as M.B. and C.M. of the Glasgow University.

HENRY STEMEN, father of the editor of the Fort Wayne Journal of the Medical Sciences, died, September 12, 1891, at the age of 83 years and 2 months.

TRI-STATE MEDICAL ASSOCIATION OF TENNESSEE, Arkansas, and Mississippi, held its meeting in Memphis, at the Gayoso Hotel, November 19th and 20th.

DR. GEORGE MCCLELLAND lectured at the Academy of the Fine Arts, November 16th, on "Anatomy," the head and skull being chosen for his subjects.

MR. JORDAN LLOYD has been appointed Professor of Operative Surgery at Queen's College, Birmingham, Eng., to succeed Prof. T. H. Bartlett, deceased.

DR. MILLER, Professor of Dentistry in the University of Berlin, has accepted an invitation to occupy the Chair of Histology in the University of Pennsylvania.

THE proceeds of the Charity Ball, in January, are to be divided between the Maternity Hospital, Gynecean, Southeastern Dispensary, and Oral School for Deaf Mutes.

ASHTON — ROSENGARTEN.—At Philadelphia, October 5, 1891, William E. Ashton, M.D. (J. M. C., 1884), and Alice Elizabeth, daughter of M. G. Rosengarten, Esq.

DR. JOSEPH MATTHEWS and Dr. Grant, of Louisville, Ky., were the guests of Prof. Frank Woodbury during the opening of the Medico-Chirurgical Hospital of Philadelphia.

DR. J. D. RIHL died at his residence in Philadelphia, November 13th, at the age of 70 years. Dr. Rihl had for many years been one of the most successful vaccine physicians of the city.

THE Secretary of the State Pharmaceutical Board has arrested a druggist of this city, on the charge of selling adulterated drugs. His laudanum was condemned by Professor Leffmann.

M. PASTEUR has secured an annual subsidy from the French government to enable poor persons living in France, at a long distance from his institute, to reach it in the event of their requiring his treatment.

DR. HARRY B. TAYLOR, of 1324 North Fifteenth Street, Philadelphia, died, December 17, 1891, from blood-poisoning, the result of an accidental puncture in the arm during a post-mortem examination.

THE Ohio State Asylum for Epileptics, now in course of erection at Gallipolis, is the first institution of its kind in this country. Of the large number of epileptics in Ohio about 1000 are expected to enter the new asylum.

NORTH-CENTRAL ILLINOIS MEDICAL ASSOCIATION.—The eighteenth annual meeting of the North-Central Illinois Medical Association was held in the City-Hall, Streator, Ill., on Tuesday and Wednesday, December 1 and 2, 1891.

THE New York Journal of Gynæcology and Obstetrics has made its appearance. It is to be issued monthly. The editors are Dr. A. H. Buckmaster and Dr. J. D. Emmet.

DR. C. S. BOND, of Richmond, Ind., and Dr. T. Hunt Stucky, of Louisville, Ky., were elected Vice-Presidents of the Mississippi Valley Medical Association. The next meeting of the Association is to be held at Cincinnati.

THE Bacteriological World has been removed from the State University at Columbia, Mo., to Battle Creek, Mich., where its editor, Dr. Paquin, has assumed control of the new laboratory of hygiene at the Battle Creek Sanitarium.

DR. S. R. KNIGHT, Superintendent for thirty-two years of the Episcopal Hospital of Philadelphia, died, on November 14, 1891, of Bright's disease. Dr. Knight was very popular personally, and possessed excellent administrative ability.

DR. CHARLES A. L. REED, of Cincinnati, was elected President of the Mississippi Valley Medical Association. He has also lately been elected Secretary-General of the Pan-American Medical Congress, which meets in Washington in 1893.

THE Medical Faculty of the University of California has organized a one full year's post-graduate course, which it strongly advises its graduates to take. The fourth year will be wholly devoted to clinical and laboratory work.

DR. MONTPROFIT, surgeon to the hospitals, is named professor of external pathology to the School of Medicine at Angers. Dr. Thibault, physician to the hospitals, has been selected as professor of internal pathology for the same school.

THE French Minister of the Interior has awarded a silver medal to Dr. Debay, of Robecq, for his devotion to duty during the severe epidemics of typhoid fever and scarlet fever which, in 1890–91, raged in the neighborhood of Robecq.

IN an able presidential address before the Minnesota Academy of Medicine, published in the Northwestern Lancet for December 1, 1891, Dr. C. A. Wheaton, of St. Paul, describes a case of osteomalacia, and gives a comprehensive review of the literature of that peculiar affection.

THE GERMAN ANATOMICAL SOCIETY.—The German Anatomical Society now numbers two hundred and fifty-one members. Professor von Kölliker is the President, Professors His, Waldeyer, and Toldt are the Vice-Presidents, and Professor K. Bardeleben, of Jena, is the Secretary.

DR. ERNEST WENDE, of Buffalo, has been appointed Health Commissioner of that city, under the new charter, which takes effect January 1, 1892; and Dr. John A. Pettit, of Buffalo, Deputy Health Commissioner.

THE Emperor of Austria has approved of the proposal to create a medical faculty in the University of Lemberg. Immediate steps are to be taken to organize the new faculty, which is expected to be in working order by the beginning of the academic year, 1894–95.

DR. WILLIAM COGSWELL, of Bradford, Mass., who died August 15th, at the age of 72 years, was an ex-president of his State Medical Society, and the third one of that rank to go over to the majority during the present year.

IN acknowledgment of the success of a serious surgical operation, performed by Dr. Michelsen, of Wiesbaden, on his wife, Herr von Donner, a merchant of Hamburg, has given the latter city 2,000,000 marks for the erection of a hospital in Hamburg, with Dr. Michelsen as chief physician.

THE JOURNAL OF BALNEOLOGY.—It is announced that Dr. J. N. Bell, of Brooklyn; Dr. Frank Woodbury, of Philadelphia; and Dr. Geo. H. Rohé, of Baltimote, are to be the editors of this journal, in the departments of balneology, dietetics, and climatology, respectively.

SCIENTIFIC MISSIONS.—M. Stéphane Jousselin, pupil of the school of political sciences, is charged with a mission to the United States, especially to Illinois, for the purpose of pursuing ethnographic investigations. M. Jules Desfontaines is to be sent to the United States, Canada, and the Orient, in order to make scientific collections for the French government.

A MUNIFICENT DONATION.—The Montreal General Hospital will shortly receive the sum of $100,000, the benefaction being made in the will of the late George Chetwode Hamilton. This sum is left at the disposal of the Board of Managers, to be employed in such manner as will best conduce to the promotion of the work of the hospital.

TO PARTICIPATE IN THE DUBLIN THREE-HUNDREDTH ANNIVERSARY.—The trustees of the University of Pennsylvania have decided to accept an invitation from the University of Dublin asking participation in its three-hundredth anniversary. Provost Pepper was authorized to appoint two delegates.

THE Emperor of Germany, in honor of Virchow, has decreed that Thirty-second Street, Ward XIII, leading to rear of the civil hospital, Friedrichshaus, in Berlin, shall receive the name of "Virchow's Street." He, as is known, promoted the foundation of this hospital, established chiefly by his gift.

DR. ROLANDO KUEHN (Jeff., '83) has been elected Port Surgeon at Bluefields, Nicaragua, and chief medical officer of Mosquito Reservation. The doctor, since his graduation, has spent two years at sea, three years in the service of Kalahana, one year with the Nicaragua C. C. Company, and has been in his present location for a year past. Dr. Kuehn hopes to meet all his classmates at Chicago, in '93, at the Class Reunion.

DR. L. R. H. ROGER died at Paris, November 15, 1891, at the age of 83. The deceased was a former President of the Academy of Medicine, Honorary Physician to the Hospitals of Paris, President of the General Association of French Physicians, and Commander of the Legion of Honor. Dr. Roger was especially known by his "Practical Treatise on Auscultation," which, written in collaboration with Barth, was originally published in 1840 and had passed through numerous editions.

ANNUAL RECEPTION WITH COLLATION.—At a meeting of the Philadelphia County Medical Society, held December 10, 1890, it was resolved that the Society should devote the meeting each year to the effort to increase the resources and extend the usefulness of its Mutual Aid Association. In furtherance of this purpose the directors authorized a special meeting of the Society for the evening of Wednesday, December 16, 1891. Dr. Henry W. Williams, of Boston, former President of the American Ophthalmological Society, who is prominent in a similar benevolent enterprise in the State of Massachusetts, accepted an invitation to attend, and presented facts of interest in regard to the operations of his own Association. Addresses were also delivered by Rev. H. L. Wayland, D.D.; Dr. John B. Roberts, President of the Philadelphia County Medical Society; Dr. De Forest Willard, President of the Mutual Aid Association, and others. Immediately after adjournment, a reception, with collation, was tendered to the guests of the Association, at the University Club, 1316 Walnut Street.

THE Fourth Season of the Food Exposition opened on November 19, 1891, at Horticultural Hall, and continued until December 5th. The object of the Exposition is to present, in an attractive manner, the very many new articles of food manufactured; also to educate the consumer to the higher standard of food products.

ARRANGEMENTS have been made to issue a quarterly Journal of Pathology, specially devoted to "scientific memoirs on pathological subjects, doctrines of diseased actions, general pathology and bacteriology." It will be edited by Dr. G. Sims Woodhead, with the assistance of Dr. Sidney Martin and Dr. Armand Ruffer. We learn that a Journal of Pathology and Bacteriology, to be edited by Professor Roy, F.R.S., is also in contemplation.

DR. FREDERICK P. HENRY, who has been one of the instructors at Jefferson, and was a candidate for the Chair of Practice, has been elected to the corresponding chair in the faculty of the Woman's Medical College. Dr. Henry has been for years one of the attending physicians to the Philadelphia Hospital and to the Episcopal Hospital, and Professor of Clinical Medicine in the Polyclinic, and still retains these positions.

NEW YORK STATE MEDICAL SOCIETY.—The next meeting of the Medical Society of the State of New York will be held at Albany, February 2, 3, and 4, 1892. Dr. Seneca D. Powell, No. 12 West Fortieth Street, New York; Dr. James D. Spencer, of Watertown; and Dr. Franklin Townsend, No. 2 Park Place, Albany, have been appointed the Business Committee. Any communication regarding papers or any matter pertaining to the business of the Society, which should properly come before the Business Committee, should be addressed to Dr. Seneca D. Powell, 12 West Fortieth Street, New York City. A. Walter Suiter, president; F. C. Curtis, secretary.

AT the eighty-sixth annual meeting of the Medical Society of the County of New York, an election of officers was held for the ensuing year. The nominations for president were Dr. Orlando B. Douglas (the present incumbent) and Dr. George H. Fox. One hundred and sixty-six ballots were cast, of which Dr. Fox received 92 and Dr. Douglas 74. Dr. Fox is Professor of Diseases of the Skin at the New York College of Physicians and Surgeons, and President of the New York Dermatological Society. Dr. Seneca D. Powell was elected vice-president; Dr. Chas. L. Dana, second vice-president; Dr. Charles H. Avery, secretary; Dr. William E. Bullard, assistant secretary; and Dr. John S. Warren, treasurer.

DEATH OF THOMAS LITTLE.—We very much regret to announce the death of Dr. Thomas Evelyn Little, of Dublin, which occurred rather suddenly on Monday night, November 9th. On that day he went to the medical school of Trinity College to lecture as usual in his capacity of University Anatomist. He had made all his preparations, the class had assembled, and the bell had rung, when a message was sent to Professor Cunningham that Dr. Little was very ill in his room. Dr. Cunningham at once ran to his aid, and was helped by Drs. Taylor and Woods, demonstrators. Dr. Little was found to be suffering from intense pain in the head and was vomiting freely. Professor Bennett was at once sent for, and these gentlemen remained with him for some time administering remedies. After a

couple of hours, Dr. Little was sufficiently recovered to be brought home, and then he saw his friend, Dr. Nugent. He rallied sufficiently to be left in charge of the nurse for an hour, and it was believed that he would recover. At the next visit, however, it was found that the symptoms had become more urgent than before, he became comatose, and died soon afterward.

Dr. Little graduated in medicine in the University of Dublin in 1866, and was appointed a Demonstrator of Anatomy in the School of Physic, later on succeeding to the important positions of University Anatomist and Surgeon to Sir Patrick Dun's Hospital.

An interesting lawsuit was decided in the Court of Common Pleas recently. Dr. David Bartlett Gould applied for membership in the New York Academy of Medicine, and was blackballed. In consequence of this he sued Dr. Alexander S. Hunter for $20,000 damages, swearing that the latter gentleman called him an unscrupulous practitioner before a committee of the Academy, and accused him of unprofessional conduct. Dr. Hunter denies these charges, and his testimony is corroborated by fifteen witnesses, all prominent physicians and members of the Academy and County Medical Society. The jury decided the case in favor of the defendant.

The second annual session of the Association of Military Surgeons of the National Guard of the United States will be held at St. Louis, April 19, 20, and 21, 1892. An interesting programme of addresses by prominent surgeons of the National Guard and the United States army has been arranged, and a goodly number of scientific papers on military and accidental surgery will be read and discussed, and all matters pertaining to the health, usefulness, and welfare of the civilian soldiers will receive attention.

The afternoon of one day will be set apart for an object-lesson from the "Manual of Drill" by hospital corps of the United States army detailed for this purpose. This will be a very important as well as instructive feature of this session. The evenings will be given up to entertainments, receptions, and banquets, which the medical profession and generous citizens of St. Louis have planned for their distinguished guests. The committee of arrangements have received the assurance that transportation will be satisfactorily reduced on all railroads and steam-boats, to and from this meeting. The several hotels have promised a low and uniform rate, which will be announced at an early date. It is anticipated that not less than 500 surgeons and assistant-surgeons of the National Guard of the United States will be in attendance, to all of whom the Committee of Arrangements extend a most cordial welcome. The following are the officers of the Association: President, Nicholas Senn, Brig.-General and Surg.-General National Guard, Wisconsin, 532 Dearborn Avenue, Chicago; Secretary, Frederick L. Matthews, Colonel and Surg.-General National Guard, Illinois, 320 South Fifth Street, Springfield; Chairman Committee of Arrangements, Eustathius Chancellor, Lieut.-Colonel and Medical Director, First Brigade National Guard, Missouri, 515 Olive Street, St. Louis.

The Körösi Prize.—Dr. Joseph Körösi, of Buda-Pesth, has offered the sum of $300 as a prize for the best essay on the objects of demography and its progress in the chief countries of Europe and America. The competition remains open until January 1, 1894. The award will be made at the opening meeting of the next International Congress of Hygiene and Demography, at Buda-Pesth, in 1894. The essays may be in either the English, French, German, or Italian languages.

The Southwestern Ohio Medical Association has elected the following officers for the ensuing year: President, Dr. R. T. Trimble, of New Vienna; First Vice-President, Dr. Charles A. Hough, of Lebanon; Second Vice-President, Dr. T. P. Patton, of Dayton; Secretary and Treasurer, Dr. William Scott, of Loveland; Assistant-Secretary, Dr. G. M. Austin, of Wilmington. The Society meets next April at Wilmington.

The Next International Medical Congress.—It is considered likely that the date of the next meeting of the International Medical Congress, which is to be held at Rome in 1893, will be fixed for September, instead of Easter, as at first proposed. The Organizing Committee has not, however, yet come to a final decision on the subject. Professor Baccelli is the president and Dr. Maragliano the secretary-general of the committee. The following are the sections of the Congress, with their respective presidents: anatomy, Dr. Antonelli; physiology, Drs. Albini and Albertoni; pathology, Drs. Foà and Bizzozzero; therapeutics, Dr. Cervello; clinical medicine, Drs. Baccelli, Murri, Bozzolo, and Maragliano; surgery, Dr. Bottini; obstetrics, Dr. Morisani; psychological medicine, Drs. Morselli and Tamburini; ophthalmology, Drs. Secondi and De Vincenzi; dermatology and syphilography, Drs. Campana and Barduzzi; forensic medicine, Dr. Tamapia; hygiene, Drs. Pagliani, Banalis, and Belli. Many applications for membership have already been received, and the attendance is expected to be very large.

American Association of Obstetricians and Gynæcologists.—The following officers of the Association for the ensuing year were elected at the business meeting: President, Dr. A. Vander Veer, Albany, N. Y.; First Vice-President, Dr. Hampton E. Hill, Saco, Me.;

Second Vice-President, Dr. Robert T. Morriss, New York City; Secretary, Dr. William Warren Patten, Buffalo, N. Y.; Treasurer, Dr. Xavier Oswald Winter, Pittsburgh, Pa.; Executive Council, Drs. Charles Alford Lee Reed, Cincinnati; Lewis S. McMurtry, Louisville; George H. Rohé, Baltimore; James F. W. Ross, Toronto; William Wotkyns, Seymour, N. Y. The next meeting is to be held at St. Louis, Mo., on the third Tuesday in September, 1892.

DR. FRANCIS DONALDSON, Professor of Diseases of the Throat and Chest in the University of Maryland, died December 9, 1891, aged 69 years. He had been ill for several months, but had improved, and hope was entertained of his comparative recovery. The cause of his death was kidney trouble. Dr. Donaldson was well known as a teacher and writer.

ASSASSINATION OF A PHYSICIAN.—A note in a late number of Le Progrès Médical announces the murder of Dr. Béziat, chief of the Medical Service of the French colony of Suberbieville, on the west coast of Madagascar. The doctor was about to return to France, and, with an escort, had taken a canoe to board the steamer Lorraine, which lay about two and a half miles from the town. In passing a ford, the boat was fired upon by native bandits, who were hidden in the reeds lining the river-bank. Dr. Béziat received two balls at close range, fell into the river, and was dispatched by spears. His companions also perished. He was bringing home a valuable geological collection.

WE received, too late for publication in the December number, the Annual Christmas Circular of the Pennsylvania Training School for Feeble minded Children. We refer with pleasure to the work of this excellent and truly humane institution. The appeal was made for timely contributions for the enjoyment of the children, or for special means for their improvement. So generous in recent years have been these contributions that a portion is now annually added to the Free Fund, which to-day supports sixteen children, all of whom are either fatherless or entire orphans, who, without this beneficent provision, would be thrown upon mothers struggling to support themselves and their other dependent children, or who might be cast into almshouses, where their helplessness and sensitiveness could be but sadly administered to. Though the special occasion of innocent festivity has passed, contributions to the free fund will be no less acceptable. The address of the school is Elwyn, Pa.

DR. SPRINGER has been appointed Chief of the Laboratory of Pathological Physiology in the service of the medical clinic of Professor Potain, at the Charité Hospital. Dr. Daniel Critzman takes the place of curator of pathological anatomy in the practical school of the Faculty of Medicine, Paris.

STUDYING ABROAD.—Dr. Charles H. Probst, of the Class of 1888 of the Medico-Chirurgical Hospital of Philadelphia; Dr. Isidore Martin Koch and Dr. J. Hirst-Maier, of the Class of 1891 of the same institution, are again fellow-students in Vienna, Austria, studying special departments in this great centre of the Old World. We learn that they are much pleased with the kindness and attention from the clinical teachers, who do all they can to advance their students in becoming proficient in special work.

A VICTIM OF TIGHT-LACING.—Tight-lacing was, indirectly, the cause of the mysterious and sudden death of Miss Clara S. Holloway, in Camden, at a card-party, Saturday night, November 14th, according to the opinion of the doctors who made a post-mortem examination. County Physician Iszard presided at the post, and was assisted by Drs. Middleton, Casperson, Ireland, and Leavitt. They found that death resulted from cerebral hæmorrhage, resulting from congestion of the lungs, superinduced by the tightness of the young lady's clothing.—*Philadelphia Inquirer.*

[No doubt many other similar cases occur, but are not reported. Tight-lacing appears to be carried on, both by girls and women, entirely too frequently in our country.—EDITOR.]

MARRIAGE OF A MEDICAL STUDENT.—On November 24th, Mr. Charles Wood Latham, of the Medico Chirurgical College of Philadelphia, was married to Miss Marianita de la Forest, daughter of Mrs. Stephen O. Fuguet. At the conclusion of the ceremonies a marriage-reception was given by Mrs. Fuguet at her residence, 1128 Spruce Street. Many of the teachers, friends, and fellow-students of the groom were at this time handsomely entertained by the mother of the bride.

THE officers of the American Laryngological Society for the next year are as follow: President, Dr. S. W. Langmaid, of Boston; First Vice-President, Dr. Morris J. Asch, New York; Second Vice-President, Dr. S. Johnston, Baltimore; Secretary and Treasurer, Dr. C. H. Knight, New York; Librarian, Dr. T. R. French, Brooklyn. Council: Dr. W. C. Glascow, St. Louis, Mo.; Dr. F. I. Knight, Boston, Mass; Dr. D. Bryson Delavan, New York, N. Y.; Dr. Harrison Allen, Philadelphia, Pa. The next session will be held at Boston in June, 1892.

THE Cincinnati Medical Society has elected the following officers for the ensuing year: President, Dr. F. W. Langdon; First Vice-President, Dr. J. A. Thompson; Second Vice-President, Dr. Amelia J. Prior; Recording

Secretary, Dr. L. S. Colter; Corresponding Secretary, Dr. W. L. Mussey; Treasurer, Dr. J. C. Oliver.

INFLUENZA EPIDEMIC.—In Philadelphia, as well as throughout the State of Pennsylvania, the influenza has again appeared as an epidemic. A large number of persons have been ill from this disease during the past month, and the death-rate has increased greatly, especially in this city.

ACONITE seems to be the favorite poison of physicians who seek to take their lives. The death, by this means, of Dr. Douglass, in Kansas City, will recall the fact that within the last six months there have been 4 or 5 cases reported of medical men who have committed suicide by the use of this same drug.

THE Penn Club gave a reception last month to Dr. James C. Wilson, Dr. Hobart A. Hare, and Dr. Morris Longstreth, of the Faculty of the Jefferson Medical College.

HARVARD MEDICAL SCHOOL.—Bulletin No. 1 of the Harvard Medical School Association has just been published in pamphlet form. The officers of the Association, the constitution, and the annual dinner and business meeting are included in this first report. Dr R. W. Lovett, the Secretary, 379 Boylston Street, Boston, will be pleased to mail the Bulletin to any of the graduates of the school.

DEATH OF PROFESSOR GERHARD.—We regret to have to announce the death of a colleague, an active worker in the Medico-Chirurgical College and Hospital of Philadelphia, and a gentleman who was one of the early teachers and clinicians in this institution. Dr. Gerhard, who was 52 years old, died at his residence, 661 North Sixteenth Street, Philadelphia, from an attack of influenza, on Tuesday evening, December 15th, after a sickness of only a few days. Dr. Gerhard came to this city from Montgomery County, where his family were among the early settlers. He was a graduate of Franklin and Marshall College, and also of the University of Pennsylvania. He was the writer of some valuable medical papers, and prominent in the Reformed Church. Wide as were his attainments, they were not broader than his sympathies for the poor and his kindness of heart.

CORN-BREAD has various names in different localities. The general name of the article is Indian-bread. In Delaware, griddle-cakes made of Indian-meal are called corn-cakes; in Maryland they are called cookies. Pone is the name for Indian-bread an inch or more in thickness and baked to a crisp crust top and bottom. In parts of New England corn-meal, baked into a thick, crisp cake, is called Indian bannock. The Puritans, it is supposed, learned the art of baking that bread from the Bannock Indians.

THE Therapeutic Gazette will be put under the editorial control, on January 1, 1892, of Dr. Hobart Amory Hare. Dr. Hare will be assisted by a brilliant staff, of which Drs. Martin and De Schweinitz will form a very able part.

DR. E. FRANK GARRETT, a well-known practitioner of Germantown, who had been prostrated with the grippe, died on Wednesday, December 16th, from paralysis induced by the disease. Dr. Garrett, who was 35 years old, was a graduate of the Jefferson Medical College, and had practiced medicine in Germantown for twelve years.

JEFFERSON'S NEW PROFESSORS.—A complimentary dinner tendered at the Bellevue recently by the Alumni Association of the Jefferson Medical College to Professors Morris Longstreth, H. A. Hare, and James C. Wilson, in honor of their election to chairs in the institution, was one of the most felicitous and successful events of the kind in the history of the Association. Dr. O. H. Allis, President of the Association, presided, and made the address of welcome. Addresses were also made by Professors Hare, Longstreth, and Wilson; Provost Pepper, of the University; Professor S. Weir Mitchell, Furman Sheppard, and others.

THE VIRULENCE OF PNEUMONIC SPUTUM.—Bordoni-Uffreduzzi (Centralblatt f. Bak. u. Parasitenk., September 18, 1891) has sought to determine the length of time during which pneumonic sputum, when dried by exposure to the air, retains its pathogenic activity. His procedure was as follows: The sputum was collected and dried in a room at the ordinary temperature, some of the sputum being exposed to diffused daylight for a number of days, the rest to direct sunshine for twelve hours. At intervals a little of the sputum was mixed with water and injected subcutaneously into a rabbit. Experiments made with the sputum treated as exaggerated. Treatment with boric lotion and draughts of chloral, combined with removal from the source of poisoning, brought about a cure after some days. The explanation of this case seems to have been that the girl had been exposed all day to an atmosphere laden with the vapor of carbon bisulphide; the initial symptoms—headache and heavyness of the head—are undoubtedly those associated with poisoning by this drug. The later symptoms were probably due to the same cause, and, judging from the order of their appearance, were the result of a further action on the central nervous system, first on the medulla and cervical cord, and eventually on the whole spinal tract. It may be suggested

that the affection was, in a measure, hysterical, but against this view there are the facts (1) that there was no history, either actual or hereditary, of hysteria; (2) that the contractures were incomplete and generalized, the limbs being the least affected, there being also no disturbance of sensation; (3) that the usual stigmata of hysteria were entirely absent. Beyond the contracture there was no nervous phenomenon. Other cases of poisoning by carbon bisulphide have been recorded, notably by Delpech, but none of them showed such a firm contraction of the jaws, and in them the contractions always passed off after a few days.

MR. WHARTON JONES.—By the death of Mr. T. Wharton Jones. F.R.S., the world has lost a singularly gifted man, and one to whom medical science is deeply indebted for various important physiological discoveries. He began his life, as a teacher, as demonstrator of anatomy at Edinburgh; subsequently, on coming to London, he devoted himself to physiology; at that time Jones and Sharpey were the only two physiologists worthy the name in the great city, and keen rivalry existed between these two men even till a few years ago, when Sharpey died. After a comparatively short career as teacher of physiology, Mr. Jones devoted himself to ophthalmic practice, and became Professor of Ophthalmic Medicine and Surgery at University College. When he retired, ten years ago, University College honored itself and Mr. Jones by electing him an Emeritus Professor.

Mr. Jones was of a singularly gentle and retiring disposition, but his peculiar mannerisms no doubt repelled a number of those who, if they had known him better, would have been attracted rather than repelled. It can scarcely be called an eccentricity that Mr. Jones had the greatest love for facts, and disliked all theories that did not appear to him fully proved; and he used to attack the views of those who differed from him with a warmth which, perhaps, would not be regarded by all as quite justifiable. In the later years of his life he was somewhat out of touch with modern physiology; and, though exhibiting the greatest veneration for Harvey, Malpighi, and the older investigators, would pooh-pooh the work of those who are now living, but who may hereafter be known as honorably as Harvey himself. This attitude, no doubt, caused him to be still more misunderstood by the scientific public, and, perhaps, was the cause of that non-appreciation by the Royal Society of which he would complain so bitterly. Mr. Jones designated himself a follower in the footsteps of William Harvey, and it is as a physiologist that he will be known in history. His most important discoveries were published nearly half a century ago; in those days he described the capillary circulation and the minute physiology of inflammation in so complete a way that practically very little has been added to this branch of knowledge since that time.—*Brit. Med. Journal.*

PROFESSOR VIRCHOW.—Professor Virchow, being unable to reply personally to all who joined in doing him honor on the occasion of his seventieth birthday, has published a general letter of thanks, a translation of which is here appended:—

"The completion of the seventieth year of my life has been a cause of rejoicing to my friends rather than to myself. Old age, even if it does not make its full heaviness felt, is an occasion for resignation. My friends, however, have willed that on my birthday I should once more take a general survey of my past life, my efforts, my labors, and my results. They have had their wish gratified. From almost all parts of the world there have come to me the heartiest congratulations, from many have come precious gifts, from not a few high, nay, the highest honorary distinctions. A series of festal days has elapsed, and I have not yet been able even to read all the letters and addresses and to form a picture out of the mass of recognition and sympathy which has been offered to me. Playmates of my early youth, companions of my student days, fellow-workers from every point of the compass and from all countries, even to the youngest pupils in the workroom, have come to me with congratulations. It is impossible for me to thank each individual and each association as I should wish to do, and to tell them how happy and how proud I am that so much friendship, so much love, so much good-will is felt toward me, and how anxious I am that I should not lose any of it during the term of life that still remains to me. I hope I may be permitted to express my feelings in this general letter. I have only one thing to add. I wish my friends to be assured that their recognition will not spoil my heart, and that I have no higher ambition than that I may be allowed to devote my powers for some time longer, in the old way, to the problems of science and humanity.—(Signed) RUDOLF VIRCHOW. Berlin, October 25, 1891."

DR. FORMAD RESIGNS.—Dr. Henry F. Formad, who has been Coroner's Physician for the past eight years, lately tendered his resignation, and Dr. Henry L. Sidebotham was chosen as his successor.

Dr. Henry L. Sidebotham graduated from the Jefferson College in 1885. Shortly afterward, he was appointed Assistant Resident Physician at the House of Correction, and, after serving two years, resigned to accept an appointment as physician of the Norristown Hospital for the

Insane. He served there four years, resigning to engage in private practice in this city.

Dr. Hiram Hayden Atwater died at Burlington, Vt., aged 63 years, on August 19th. He first settled in Brooklyn, N. Y., but in 1861 removed permanently to Vermont. He was Pension Examiner for many years, beginning in 1862. He was Health Officer of Burlington in 1867, and Commissioner of Lunacy for two years. Dr. Atwater had a special bent in the direction of obstetrics, and was for many years the instructor in that branch in the University of Vermont. He was also one of the medical staff of the Mary Fletcher Hospital. He was the author of various contributions in the Vermont and other medical Transactions and the American Journal of Obstetrics.

Doctors at Dinner.—The fifth annual reunion and banquet of the resident and ex-resident physicians of the Philadelphia Hospital took place at the Bellevue on the evening of December 1st, and was a very enjoyable event. The *menu* was fine, and the toasts highly entertaining. Dr. Alfred Stille, president of the organization, presided at the banquet, and made an address. "The Drugs and Drugged of Blockley" was the toast to which Dr. H. C. Wood responded. Dr. E. W. Holmes spoke of "Blockley Highways and Byways," and Dr. Frederick Wilson of the "Omniscient Resident." Among the others present were Drs. J. William White, E. L. Duer, E. R. Stone, J. B. Walker, B F. Hawley, J. H. Eldar, J. S. Gibb, S. S. Stryker, E. E. Montgomery, Thomas C. Potter, W. G. Porter; Dr. Van Valzah and Dr. Fox, of New York; Dr. Frederick Muhlenberg, of Lancaster, and Dr. Jamar, of Delaware.

Dr. A. W. Ridenour, of Massillon, Ohio, died of paralysis, on June 26, 1891, after an illness of a little more than two weeks.

Albertus Ward Ridenour was born near Hagerstown, Md., about forty-eight years ago. His parents removed to Ohio when he was about 9 years of age. Upon the breaking out of the civil war, at the age of 16 years, he enlisted as drummer in the Sixty-seventh Ohio regiment. He was discharged from the service, after a brief term, on account of sickness, but re-enlisted in the One Hundred and Twenty-first Ohio not long after. He served the greater part of his second enlistment as a hospital steward. After the war he attended lectures and graduated from the Cincinnati Medical College. He first practiced in Wadsworth, went from there to Canal Fulton, and removed to Massillon twenty-one years ago He served a number of years as health-officer of the city and as a member of the pension examining board. He was mainly instrumental in the creation of the National Association of Railway Surgeons, and served as vice-president of the same. He leaves a widow and five children.

A New Superintendent.—The committee of three, consisting of J. Vaughan Merrick, John C. Brown, and Dr. John Ashhurst, Jr., appointed by the Board of Managers of the Episcopal Hospital to select a new superintendent for that institution, met at the hospital yesterday, and elected Dr. Sykes, now assistant-superintendent of the State Hospital for the Insane, at Norristown. Dr. Sykes will assume charge on January 1st next, until which time Dr. Tunis will continue to act as superintendent.

B. S. Woodworth, A.M., M.D., died, Septemper 10, 1891, at the age of 72 years and 7 months. For over fifty years he had been actively engaged in the practice of medicine in Fort Wayne, Ind., and for all these years had been standing at the head of the profession as a highly-cultured, conscientious physician; in fact, he was far above the average in his day, both in his literary and medical attainments, and was a most valuable man in the community. That he was tenderly beloved by his professional brethren was demonstrated on the day of his funeral when all in the city were present. The citizens —in fact, the entire city—mourned when his death was announced. He had been honored by being elected President of the Indiana State Medical Society, and at various times had been President of the County Medical Society.

BOOK REVIEWS.

No. 12 in the Physicians' and Students' Ready-Reference Series. Syphilis in Ancient and Prehistoric Times. By Dr. F. Buret, Paris, France. Translated from the French, with notes, by A. H. Ohmann-Dumesnil, M.D., Professor of Dermatology and Syphilology in St. Louis College of Physicians, etc. Volume I. F. A. Davis: Philadelphia and London, 1891.

The author of this small, compact, and well-arranged volume has placed before the profession much valuable information upon syphilis. Syphilis has been traced and described from the most ancient times to the present day. The origin of the word syphilis, in Chapter II, is given in a clearer and in a better manner than in almost any work that we have examined. The history of syphilis, that is thus described so well by the author, will be of interest to all who may study disease. The concluding chapter, on the rational treatment of syphilis in the nineteenth century, abounds in useful hints and valuable points to physicians.

International Clinics. A Quarterly of Clinical Lectures on Medicine, Surgery, Gynæcology, Pediatrics, Neurology, Dermatology, Laryngology, Ophthalmology, and Otology. By Professors and Lecturers in the Leading Medical Colleges of the United States, Great Britain, and Canada. Edited by JOHN M. KEATING, M.D., Philadelphia, Consulting Physician for Diseases of Women to St. Agnes' Hospital, Philadelphia; Editor "Cyclopædia of the Diseases of Children;" J. P. CROZER GRIFFITH, M.D., Philadelphia, Clinical Professor of Diseases of Children in the University of Pennsylvania; Professor of Clinical Medicine in the Philadelphia Polyclinic; J. MITCHELL BRUCE, M.D., F.R.C.P., London, England, Physician and Lecturer on Therapeutics at the Charing Cross Hospital; DAVID W. FINLAY, M.D., F.R C.P., London, England, Physician to the Middlesex Hospital, and to the Royal Hospital for Diseases of the Chest; Lecturer on Clinical Medicine in the Middlesex Hospital Medical School, October, 1891. Philadelphia: J. B. Lippincott Company, 1891. Price, $2.75.

The third number of this work contains many very practical and useful clinical lectures by some of the leading teachers of different parts of the world. Among the many lectures is one by Dr. Gardner, of Glasgow, who speaks with interest of acute intestinal obstruction. Another very valuable contribution is by Dr. Percy Kidd, of London, upon the examination of the sputum for tubercle bacilli, and its bearing on diagnosis and treatment. The illustrations which accompany many of the lectures are very good. We note, especially, an admirable picture of erythema exfoliatum recurrens, reported by Dr. Blanc, showing how the epidermis is shed from the hands and soles. This volume is well printed, and will be of much service to all practitioners for the many practical lectures which it contains.

Hydatid Disease in its Clinical Aspects. By JAMES GRAHAM, M.D. (Edin.), late Demonstrator of Anatomy, Sydney University; Medical Superintendent Prince Alfred Hospital, Sydney. Illustrated with 34 Colored Plates. Edinburgh and London: Young J. Pentland. Philadelphia: J. B. Lippincott Company, 1891.

The author of this volume has given the profession one of the most useful of all recent publications. He begins with a good introduction, and follows with the source of hydatid disease and its method of prevention, together with a thorough description of all symptoms and the diagnosis. Among the symptoms which Dr. Graham refers to, which is of interest to all physicians, is the hydatid rash, on page 77. A number of cases are described, with the urticaria-like eruption which sometimes follows the tapping of the cysts, and on Plate XIV the rash is well demonstrated. The writer of this very excellent work further gives, clinically, a full account of hydatids in the various organs of the body, beginning with the liver and ending with the eye and orbit. The description of each organ thus invaded will certainly be found of great service to all practitioners. What will interest all physicians, however, especially, is the treatment so clearly and well set forth in the concluding portion of the work. In writing upon the treatment Dr. Graham adds that the use of electricity has never become very popular for hydatid tumors. The illustrations which accompany the text at the end of the work are not only well executed, but are very graphic pictures, especially of the pathological changes produced in the various organs by hydatid disease.

The Chinese: Their Present and Future; Medical, Political, and Social. By ROBERT COLTMAN, JR., M.D., Surgeon in Charge of the Presbyterian Hospital and Dispensary at Teng Chow Fu; Consulting Physician of the American Southern Baptist Mission Society; Examiner in Surgery and Diseases of the Eye For the Shantung Medical Class; Consulting Physician to the English Baptist Missions, etc. Illustrated with 15 Photo-Engravings of persons, places, and objects characteristic of China. In one handsome Royal Octavo volume. 220 pages. Extra cloth, price $1.75, net. Philadelphia: The F. A. Davis Company, publishers, 1231 Filbert street.

Robert Coltman, Jr., has given the reader a work intensely interesting. It contains so much valuable information, for all classes, particularly for the Doctor of Medicine. In Chapter VII, in which the author describes dissipations, the social evils of this great nation are well portrayed. In the succeeding chapters—VIII and IX—the diseases prevalent in China are given in such a clear and pleasing style as to furnish to the hard-worked doctor material which will be read with more than a passing interest. In this same part of the work Dr. Coltman has written well upon leprosy and venereal diseases, and has included many valuable points upon these diseases. Leprosy, he believes, is not as contagious and infectious as many believe outside of China. The book is handsomely published, and contains some very good illustrations.

The Physician as a Business Man; or, How to Obtain the Best Financial Results in the Practice of Medicine. By J. J. TAYLOR, M.D. The Medical World, 1520 Chestnut Street, Philadelphia. 1891.

Dr. Taylor has given the profession a book of great value. He shows how much doctors

neglect the business part of their work. It points out, in very many ways, how money can be saved and made. The author has evidently had a business training, or especial tact to look after this part of the physician's life work. Our readers will not only be pleased with this volume, but should be greatly benefited by following many of the author's suggestions.

Age of the Domestic Animals. Being a Complete Treatise on the Dentition of the Horse, Ox, Sheep, Hog, and Dog, and on the Various other Means of Determining the Age of these Animals. By RUSH SHIPPEN HUIDEKOPER, M.D., Veterinarian (Alfort, France); Professor of Sanitary Medicine and Veterinary Jurisprudence, American Veterinary College, New York; Lieutenant-Colonel and Surgeon-in-Chief National Guard of Pennsylvania; Fellow of the College of Physicians, Philadelphia; Honorary Fellow of the Royal College of Veterinary Surgeons, London; Late Dean of the Veterinary Department, University of Pennsylvania. Illustrated with 200 Engravings. Complete in one handsome Royal Octavo volume of 225 pages, bound in extra cloth. Price, $1.75.

Dr. Huidekoper, who has been both a successful teacher and clinician, has written a work of value to every one who may even consider Domestic Animals. He has not only defined well the dentition of the various animals, but has taken occasion to illustrate his work by suitable cuts. The study of dentition in domestic animals will be of interest alike to those who may give the subject attention in the human subject. The author has also given attention to the determination of the age by the horns of the ovine and caprine races. The work is well written, illustrated by good wood-cuts, and it is of much scientific interest.

The Bachelor of Salamanca. By A. R. LE SAGE. Translated by JAMES TOWNSEND. With photo-gravure illustrations. 1 vol., 12mo., cloth. The Rose Library: Worthington Co., New York. Price, $1.00; paper, 50 cents.

One of the renowned series of Le Sage's adventure romances. Related in a masterful and most entertaining manner, the writer exhibits remarkable boldness, force, and originality, while at the same time he charms by his surprising flights of imagination and his profound knowledge of Spanish character and customs.

Light o' Love. By CLARA DARGAN MACLEAN. 1 vol., 12mo. Illustrated. ½ Rox. International Library: Worthington Co., New York. Price, $1.25; paper, 75 cents.

This unique title indicates a book of striking and unusual interest. The scenes are laid in Charleston, S. C., in *ante-bellum* days, when its society was *sui generis* refined, cultured, hospitable; and, under a slight disguise, the wits and belles of a now almost forgotten period, move before us in a glamor of grace and beauty and chivalric splendor. The story is full of brilliant local color, and abounds in dramatic situations. As a study of character, it rivals the best introspective productions of the modern subjective school, while the lofty ethical tone will make the book acceptable to those whose consciences disapprove the ordinary romantic novel.

With Stanley in Africa. An unusually handsome book, by CAPTAIN MCCLURE. Price, $2.50.

This is an exceedingly interesting, in fact, thrilling account of the travels and adventures in the dark continent of the intrepid traveler and explorer, Henry M. Stanley, commencing with his "How He Found Livingstone," down to the "Rescue of Emin Pasha." This volume is now looked upon as the standard book on the subject, and as it is a story of almost superhuman sufferings, endurance, and self-sacrifice, it no doubt will remain one of the popular reading-books of the nation for generations to come.

Worthington's Annual. Price, $1 25.

This annual visitor, that has brought pleasure and agreeable instruction into thousands of households, continues to be the favorite. Its success is well deserved, for the hundreds of illustrations in tints and colors are simply marvelous and the text singularly entertaining, at the same time instructive in an exceptional degree.

Manners and Customs of Spain. By JAMES MEW. Price, $5 00.

This book contains explanatory text and 36 exquisite etchings, by R. de Los Rios, illustrating Spanish life as presented in the writings of Cervantes, Le Sage, Mendoza, and Aleman. It is a very quaint production, and appeals to all lovers of the fine arts.

A B C of The Swedish System of Educational Gymnastics. A Practical Hand-Book for School-Teachers and the Home, with 77 illustrations. By HARTVIG NISSEN, Instructor of Physical Training in the Public Schools of Boston, Mass.; Instructor of Swedish and German Gymnastics at Harvard University's Summer School, 1891; Author of "A Manual on Swedish Movement and Massage Treatment," etc. Bound in extra flexible cloth, 75 cents. Philadelphia and London: F. A. Davis, publisher.

This small volume is useful for physicians, students, and all who may be interested in public health. The cuts, showing the various movements of the body, are very good, and the text is clear, simple, and expressive.

Transactions of the Ophthalmological Section of the American Medical Association, at the Forty-second Meeting, held at Washington, D. C., May 5–8, 1891.

The officers of this Section, through the editor of the Journal of the American Medical Association, have reproduced a nice, compact, and well-arranged volume of the papers read before them one year ago. Some of the papers contain much clinical experience of value, and many original observations.

Peep o' the Morn. By MARY E. LATHBURY. Price, $1.75.

It presents poems and drawings by the most graceful of living American illustrators of child life,—Mary E. Lathbury. The twelve colored designs are full of light and brilliancy, and the poems that accompany the drawings are of high poetic order.

Our Boys in Ireland. By HARRY W. FRENCH. Price, $2 50.

A brilliant story of a summer jaunting; really, the best book of travel published for many a year. It is profusely illustrated, gives a most graphic account of beautiful Ireland, tells us of its lakes, mountains, and cities, besides making us acquainted with representatives of its people, as met by the party of bright American boys who traveled through it in quest of enjoyment and instruction. We also get an insight into race characteristics by vivid glimpses of its history and romantic and sometimes amusing legends.

Memory's Sketch-Book. With the designs of HELEN P. STRONG. Price, $2.50.

A gift-book of exceeding charm. The drawings which embellish those popular English and American poems and folk-songs are printed in tints on a rich, cream-like paper, and give the book a very luxurious appearance. It is a veritable treasury of picture and song.

Buds and Blossoms. By LUCY E. VILLEPLAIT. Price, $1.75.

This occupies, perhaps, the front rank among children's art-books of highest type. Illustrated with 24 brilliantly-colored plates, *fac similes* of water-colors, with text in prose and verse. In every respect a book of remarkable beauty and a splendid specimen of American color-printing.

Sun-Dials, or How Mammas Tell Time, and Other Poems and Stories. By C. F. DALEY. Enriched with Colored Designs by ANNIE B. SHEPLEY, a young American artist of the highest promise. Price, $1.75.

The drawings of this genuine art-treasure show a charming delicacy of conception, remarkable perfection of artistic treatment, while the coloring of the plates is perfect.

Consumption: How to Prevent it, and How to Live with it. Its Nature, Cause, Prevention, and the Mode of Life, Climate, Exercise, Food, and Clothing Necessary for its Cure. By N. S. DAVIS, JR., A.M., M.D., Professor of Principles and Practice of Medicine, Chicago Medical College, etc. F. A. Davis. Philadelphia and London, 1891.

The author of the very important subject included in this work is a physician having a large clinical experience. He has been for many years a teacher, writer, and clinician, especially in diseases of the chest, and gives the opinions advanced from a rich field of experience. Further, he has been trained by his eminent father, Nathan Davis, Sr., one of the brightest and most capable practitioners in the medical profession. The opportunities the author has thus enjoyed for many years has given him much advantage to study, observe, and write intelligently upon this disease, that annually destroys in our country so many lives among all classes.

One need only glance at the text of this work to see how well the author has fulfilled his task. From the first chapter, in which Dr. Davis described the nature of consumption, inclusive of Chapter IX, in which he gives the treatment of this disease, the reader is furnished with the valuable clinical observation of the author. Every chapter is interesting, and can be read and consulted with much practical service to every intelligent reader. The rules laid down for the prevention of consumption in Chapter III will be of the greatest value to both physician and patient. We may likewise commend the fine description given by Dr. Davis of the hygienic treatment of consumption by suitable climate, proper exercise, clothing, and diet, in various individuals. The reader will find in this work an especially good account of the climate adapted to different cases in all parts of the country.

Lessons in the Diagnosis and Treatment of Eye Diseases. By CASEY A. WOOD, C.M., M.D., formerly Clinical Assistant Royal London Ophthalmic Hospital, etc., with numerous wood-cuts. Geo. S. Davis: Detroit, Mich. 1891.

Physicians as well as students often have occasion to look up or post themselves upon a special department, especially upon eye diseases. The small volume alluded to above will often give this opportunity to those who seek information. The normal eye and the eye in disease is carefully reviewed by the author. He offers many valuable ideas upon this special department, and alludes to all the modern treatment in eye diseases in a very compact and small volume. It can easily be carried in the coat-pocket, and can be consulted with advantage when one is visiting patients.

COMMERCIAL NEWS.

La Grippe.

The following timely remarks are taken from the October number of the Medical Mirror:—

"Feeling the importance of keeping open the excretory system of glands, and at the same time considering thoughtfully the rheumatic feature that accompanies these cases, no remedy would more promptly suggest itself to our mind than that of Mellier's Tongaline. Knowing as we do definitely the component parts; that each fluidrachm represents 30 grains of tonga, 2 grains of extractum cimicifugæ racemosæ, 10 grains of the salicylate of sodium, $\frac{1}{100}$ grain of pilocarpin salicylate, $\frac{1}{500}$ grain of the salicylate of colchicin, the combination naturally suggests antagonism to a locked-up condition of the glands, opposition to neuralgia, rheumatism, nervous headache, and gout.

"Clinical experience extending over a number of years, including all sizes, ages, and conditions of patients, in private practice and hospital work, as also satisfactory results in one's own family and person, justifies most favorable conclusions regarding this compound

"We commend it earnestly and emphatically to the practitioners of the country at large to meet the conditions to which we have referred."

Bromidia.

Dr. M. Chaper, Grenoble, France, says:—

"I have never known a soporific so efficacious as Bromidia, except morphine, and morphine is not so agreeable, and has inconveniences which I have not discovered in Bromidia. I have used this latter preparation frequently, and it has never failed in producing the desired effect."

Will it Cure?

Dr. Allen, of Peterboro, N. H., has a new remedy for diphtheria:—

"The subject of diphtheria, its prevention and cure, is one that is of great interest just now here, when the dreaded disease is so prevalent in certain parts of the city and county. Dr. Allen, of Peterboro, thinks that he has found a cure that will reach even very bad cases, and he has had opportunity to test it, with excellent results in every case. He stumbled upon it, as it were, entirely by accident. He had a severe case of diphtheria under his care, the patient being a young boy. The doctor was using Platt's Chlorides as a disinfectant and the boy took a fancy to the odor, and asked to have some near his nose. The doctor would hardly have acceded to the request, but it seems that the boy's grandmother saturated a handkerchief with the disinfectant and put it on the child's face. At this time the membrane peculiar to diphtheria had formed nearly up to the teeth, and Dr. Allen considered the case a hopeless one. That night after the application of the Chlorides holes appeared in the membrane, and in the morning the membrane had disappeared. The boy lived. Dr. Allen says that he has had several cases since then that were very bad, and he has not lost one. He had used this remedy in these cases.

"The directions which are given are: Dilute the Chlorides with 10 parts water. If used to prevent the disease, wet a cloth in the liquid and place it over the mouth and nose for about ten minutes at a time several times in the day. If used to cure the disease keep the wet cloth over the face nearly all the time until the membrane is gone."

Morrhulene.

I have been prescribing Morrhulene for some time to patients suffering from wasting diseases and can say it has proved in those cases a most efficient remedy. N. M. Wilson, M.D.

Philadelphia, November, 1889.

Quickine.

Standard Chemical Co., Jersey City, N. J.:

Gentlemen,—On reference to my clinical minutes, I find that I have used Quickine as a spray in croup and as a gargle in putrid tonsillitis, and found its use followed by speedy amelioration of the symptoms. It is a very useful and handy preparation, and ought to be in every physician's office.

Yours, faithfully, James Davis, M.D.

Canaseraga, N. Y., November 2, 1891.

Delirium Tremens.

℞ Tinct. capsici, . . . ½ oz.
Peacock's bromides, . . 1 oz.
Celerina, ... 2½ oz.

M. Sig: Teaspoonful, in water, as required, for wakefulness and excitement.